

PREA Facility Audit Report: Final

Name of Facility: Ordnance Road Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/28/2024

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

AUDITOR INFORMATION	
Auditor name:	Catrett-Bell, Joy
Email:	jcbell1111@gmail.com
Start Date of On-Site Audit:	04/10/2024
End Date of On-Site Audit:	04/11/2024

FACILITY INFORMATION	
Facility name:	Ordnance Road Correctional Center
Facility physical address:	600 East Ordnance Road, Glen Burnie, Maryland - 21060
Facility mailing address:	

Primary Contact

Name:	Thomas Laue
Email Address:	dclaue00@aacounty.org
Telephone Number:	4102226358htt

Warden/Jail Administrator/Sheriff/Director	
Name:	Christopher Klein
Email Address:	Dcklein21@aacounty.org
Telephone Number:	410-222-7084

Facility PREA Compliance Manager	
Name:	John Davis
Email Address:	DCdavi33@aacounty.org
Telephone Number:	
Name:	Destiny Foye
Email Address:	dcfoye22@aacounty.org
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Heidi Malika Abdur-Rahman
Email Address:	habdurRhman@wellpath.us
Telephone Number:	410-222-7929

Facility Characteristics	
Designed facility capacity:	540
Current population of facility:	162
Average daily population for the past 12 months:	176

Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	17-77
Facility security levels/inmate custody levels:	Medium security
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	115
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	72
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	128

AGENCY INFORMATION

Name of agency:	Anne Arundel County Department of Detention Facilities
Governing authority or parent agency (if applicable):	
Physical Address:	131 Jennifer Road, Annapolis, Maryland - 21401
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:	Mindy Ellison	Email Address:	DCElli88@aacounty.org
--------------	---------------	-----------------------	-----------------------

Facility AUDIT FINDINGS**Summary of Audit Findings**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-04-10
2. End date of the onsite portion of the audit:	2024-04-11

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:	YWCA of Arundel County MD

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	560
15. Average daily population for the past 12 months:	176
16. Number of inmate/resident/detainee housing units:	26
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	162
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	1
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>The population of inmates meeting the criteria in certain categories were not present.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>115</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>128</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>72</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>None</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>18</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>Auditor reviewed roster and selected based upon the above factors.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The Auditor began conducting inmate interviews the first day of the on-site portion of the audit. Based upon the inmate population on day one of the audit (162), the PREA Auditor Handbook required that the auditor interview a minimum of 20 inmates and a total of 23 inmate interviews were conducted. All interviews with inmates occurred in a secure area to ensure privacy. Inmate interviews were conducted using the established DOJ interview protocols. If a randomly selected inmate had refused to be interviewed, an additional inmate from the same housing area would be selected in an attempt to get a cross section from the entire general population. There were no instances of refusal of selected inmates for interviews.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>23</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>

61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information received in the PAQ, site documentation review, and interviews with staff. No inmates disclosed this during risk screening.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information received in the PAQ, site documentation review, and interviews with staff and inmates.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information received in the PAQ, site documentation review and interviews with staff. No inmates disclosed this during risk screening.</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information received in the PAQ, site documentation review, and interviews with staff and inmates.</p>

70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	None
---	------

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	8
---	---

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
---	--

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Random staff were selected from all shift assignments. There were no barriers in completing interviews based on information received in the PAQ, site documentation review, and interviews with staff and inmates.
--	--

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	20
---	----

76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. 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)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Training coordinator, Mailroom staff, Comtec-IT
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

83. Provide any additional comments regarding selecting or interviewing specialized staff.	None
---	------

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
--	--

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The Auditor had full, unimpeded access to all areas of the facility. During the review of the physical plant, the Auditor observed the facility layout, staff supervision of inmates, security rounds, interaction between staff and inmates, shower and toilet areas for inmates, observation of availability of PREA information located adjacent to and in the inmate housing areas, observation of staff communication in inmate housing areas, search procedures, and availability access of medical and mental health services. The Auditor observed and made note of the video monitoring system and camera placement throughout the facility, including reviewing the monitors.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

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

The Auditor conducted a document review of employee and inmate files and conducted spot checks of documents that were previously provided to the auditor with the PAQ, including log books and other institutional forms. The Auditor reviewed a random sampling of personnel files to determine compliance of standards on hiring, promotion and background check procedures for officers and contract staff. The Auditor reviewed the annual PREA training rosters maintained by the training staff and cross referenced the staff files with the training rosters to ensure training was verified. The training coordinator explained the process for relaying the mandated PREA information to new employees, as well as the procedure for annual refresher training. Reviewed inmate files to evaluate intake procedures, including screening, housing assignments, and verification of inmate PREA education. The Auditor requested additional supporting documentation that included training records, inmate medical records, inmate classification records, volunteer records, contractor records, and staff personnel files including PREA disclosure forms for hiring and promotions.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	The facility reported there had been no offenses committed to file.

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" 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>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-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 inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-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 inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. 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>105. 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>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>The facility reported there had been no offenses committed to file.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" 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>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT 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 inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT 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 harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The facility reported there had been no offenses committed to file.</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
- No

Non-certified Support Staff

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

- Yes
- No

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

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Identify the name of the third-party auditing entity

AB Management

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>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Policy AD-06 Prison Rape Elimination Act of 2003 (PREA)</p> <p>23-10 Organizational Chart</p> <p>Inmate Handbook</p> <p>Interviews with Staff and Inmates</p> <p>Policy states that the ORCC is committed to the safety and security of inmates, staff and others. The facility will establish guidelines and procedures to address the Prison Rape Elimination Act (PREA) of 2003 and the Department of Justice (DOJ) standards related to the same. It is the duty of the ORCC to strictly abide by as well as strictly enforce a Zero-tolerance policy on all forms of sexual abuse and sexual harassment of</p>

	<p>inmates as defined under the PREA Act, while maintaining a high level of moral, ethical conduct, and professional pride. The Auditor reviewed the policy and found that definitions of prohibited behaviors are included throughout the body of the policy. ORCC staff members, contractors and volunteers who have contact with inmates are found to have been involved in any substantiated incident of inmate sexual abuse or harassment is subject to disciplinary action. The accused could face up to include immediate termination of employment, services, or contract, consistent with the ORCC personnel policies and procedures, as well as criminal prosecution when warranted.</p> <p>The policy states that ORCC will designate a PREA Coordinator with sufficient time and authority to develop, implement, and oversee facility efforts to comply with PREA standards. A review of the organizational chart shows there is a designated PREA Coordinator that reports directly to the Correctional Facility Administrator. Interviews with the PREA Coordinator confirmed that they have sufficient time and authority to develop, implement, and oversee facility efforts to comply with PREA standards.</p> <p>A review of the ORCC Organizational Chart shows that the PREA Compliance Manager's Chain of Command consists of Classification Officer, Classification Sergeant, Records Lieutenant and Administration Captain. The organizational chart shows that the PREA compliance manager has a direct line of communication with the Correctional Facility Administrator. During an interview with the PREA compliance manager, they verified they have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p> <p>Conclusion: Based on analysis of the evidence reviewed, the facility has demonstrated compliance with all provisions of this standard. The Auditor has determined the facility meets the standard requirements.</p>
--	---

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD-06.06 Prison Rape Elimination Act of 2003 (PREA)</p> <p>Wellpath Contract Review</p> <p>Keefe Agreement</p> <p>Interviews with Staff and Inmates</p>

Per this Auditor's interview with the Correctional Facility Administrator, ORCC does not contract with any other entity for the confinement of its inmates. Based on interviews with the ORCC PREA Coordinator, Compliance Manager, there are no external contracts for the confinement of ORCC inmates. According to ORCC PREA policy, in the event the facility should contract with an outside entity for the confinement of their inmates, the facility shall include in any new contract or contract extension, pertaining to the confinement of inmates, the obligation for the contractor to adopt and comply with the PREA Standards. The facility shall provide contract monitoring for any new contract or contract extension listed above to ensure the contractor is complying with the PREA Standards. The contractor must comply with the Federal Prison Rape Elimination Act (PREA), 28 CFR Part 115 and must immediately refer any allegations of sexual abuse or sexual harassment made by a violator to the State's on-site agent. The contractor shall ensure compliance with the National Standards to Prevent, Detect and Respond to Prison Rape, effective August 20, 2012, as noted in their PREA standards. The facility contract manager and/or designee will serve as the lead for all contract related issues and will assist in facilitating meetings, determining service level agreements, overseeing the transition, and working with the ORCC program staff to ensure the contractual requirements are being met. The facility currently has no contracts with outside entities for confinement of their inmates as noted.

Conclusion: The Auditor determined the facility meets the provisions of standard.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Policy AD 06.06 Prison Rape Elimination Act</p> <p>Staffing Plan and Review</p> <p>Shift Rosters</p> <p>Housing Unit PREA Logs</p> <p>Interviews with Staff</p> <p>Shared Operational Directive</p>

	<p>Interviews with Inmates</p> <p>PO-24 Lieutenants</p> <p>Observations</p> <p>Transfers and Assignments</p> <p>Staff Internal Movement rosters</p> <p>Camera Locations</p> <p>Shift Logbooks</p> <p>The ORCC has a comprehensive staffing plan that addresses all required elements of standard 115.13. The plan addresses staffing in each department, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring and other relevant factors. The plan provides for administrative, civilian, and sworn staff in all areas of the jail, and mandatory shift staff coverage. The most recent review of the staffing analysis was completed on January 31, 2023. Additionally, the facility provided duty rosters dating back to the first quarter of 2023 through the first quarter of 2024. These documents were used to facilitate actions taken by the facility to cover any deviations from the staffing plan. Notations and daily deviations from the regular staffing plan are notated on the shift roster by the shift supervisor who ensures that staffing does not fall below the minimum required. During the on-site review, the Auditor found no discrepancies and the staffing plan had not been revised.</p> <p>Interviews with higher level staff members such as the Correctional Facility Administrator, Lieutenants, and Sergeants confirmed they conduct unannounced rounds daily and those are documented in the PREA logbook located in each housing area. Additionally, the PREA logbooks were reviewed during the tour of the facility on the first day of the onsite audit visit and a marginal number of copies of PREA logbooks were provided during the pre-audit phase.</p> <p>Conclusion:</p> <p>The Auditor reviewed policies, procedures, staffing plan, logbooks, shift rosters, made observations, and conducted interviews with staff & inmates. The facility conducts an annual staffing plan review as required by this standard and the Auditor determined the facility meets the requirements of the standard.</p>
--	--

	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Policy, Materials, Interviews and Other Evidence Reviewed:</p> <p>Policy Directive 06 A4, A5 B1 Restrictive Housing</p> <p>AD 06.06 Prison Rape Elimination Act (PREA)</p> <p>Interviews Correctional Facility Administrator, PREA Manager and PREA Coordinator</p> <p>ORCC OD 13.01 Temporary Housing</p> <p>ORCC does not house youthful offenders on a temporary status. ORCC policy OD 13.01 policy outlines the facility’s approach to housing youthful inmates. The Auditor reviewed the policy which states that youthful inmates will not be placed in a housing unit in which the inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Policy requires direct supervision by institutional staff if a youthful inmate and an adult inmate can have sight, sound, or physical contact with one another.</p> <p>The Auditors interviewed staff which stated that all precautions are taken to prevent any violation of the policy and no youthful offenders are housed at ORCC.</p> <p>Conclusion:</p> <p>During the audit tour and through interviews with the Correctional Facility Administrator, PREA manager, PREA coordinator and staff, it was determined that the facility is compliant with provisions of the standard.</p>

<p>115.15</p>	<p>Limits to cross-gender viewing and searches</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>SOD 01.0L Housing, Viewing, and Searching of Transgender/Intersex Inmates</p> <p>ORCC PO General Orders</p> <p>AD 07.03 Specialized Training</p>

AD 07.02 Employee Training

AD 06.03 Program Participation

Shift Rosters

PowerPoint Training

Training Curriculum

Training Records Signature Sheets

Staff interviews

Inmate interviews

PREA Coordinator interview

ORCC Policy and Procedures, "Searches of Inmates" prohibits cross gender strip searches for any reason and cross gender viewing of inmates showering, changing clothes and performing bodily functions. ORCC policy prohibits the pat down search of female inmates by male staff members except in exigent circumstances and any such search shall be documented. The ORCC does not conduct cross-gender pat down searches and the facility does not routinely allow female staff to pat-search male inmates. In the event a body cavity search was needed, it would be performed by a medical professional. ORCC does not conduct cross-gender strip searches or cross-gender visual body cavity searches except when performed by medical practitioners.

ORCC policies require all deputies to be trained on how to conduct pat searches to include transgender and intersex inmates. Staff stated that they are trained on Cross-Gender searches at the academy and were able to convey to the Auditor how they would conduct a search of a transgender or Intersex inmate. During staff interviews, all employees stated they were provided training on how to conduct cross-gender, transgendered and intersex inmates pat down searches.

The Auditor reviewed the training documentation regarding how to conduct cross gender pat down searches as well as how to properly search transgender and intersex inmates. The Auditor observed a section of the training curriculum that discusses professionalism and respect for the subject being searched and the techniques covered in the training appear to minimize intrusion of the inmate being searched. Document review indicates all employees hired in the past 12 months received the required training for searches.

The facility houses both male and female inmates, but predominantly male inmates. Female inmates are typically held for shorter periods of time for pre-trial detention, while awaiting transfer for long term pre/post-trial detention, or they are held for short non-consecutive terms of confinement. Female inmates detained in the facility are searched and supervised by female correctional deputies and male deputies supervise the male inmates.

The facility maintains roster assignments to provide adequate male and female staff

on duty for each shift. During normal business hours, female deputies and supervisory staff are available if needed and female patrol officers could be utilized if needed for female inmate searches during all other shifts. Female inmates' access to programming and out of cell opportunities are not limited due to a lack of female staff availability. Interviews with staff and inmates confirm that cross-gender pat down searches do not occur.

The Auditor observed opposite gender announcements being made during the tour which alerts the inmates and provides time to allow them to cover themselves prior to being observed by opposite gender staff members. Random sample viewing of CCTV placements in the housing units verified the viewing area of the cameras did not expose direct view of the prisoners while changing clothes. Cameras located in common areas and individual cells were positioned directionally away from direct view of the urinal/toilet or the area was digitally pixelated to provide a security screen to allow privacy.

The female inmates interviewed reported that they have never been searched by a male staff while at the facility. Random staff interviewed confirmed that cross-gender searches of female inmates do not occur. All inmates interviewed denied ever having been strip searched by an opposite gender staff. ORCC policy and procedure prohibits searching inmates for the purpose of determining if the inmate is transgender or intersex and inmates interviewed denied ever being searched for this purpose. The officers interviewed were aware that this type of search is prohibited.

There are no cameras that have direct view inside bathrooms or showers, and this was confirmed by observing cameras located in the central control center and during the tour. Inmates shower separately in cell showers, and this was confirmed via inmate interviews. Inmates interviewed acknowledged that they have reasonable privacy when showering, toileting and changing clothes. All staff interviewed stated that their presence is announced when they enter a housing unit of opposite gender inmates.

Interviews with staff and inmates indicated that there are female staff that work in the housing units and enter housing units daily. These interviews also confirmed that staff are making the required cross gender announcements so that inmates can shower, change clothes and perform bodily functions without staff of the opposite gender viewing their genitals. This was also confirmed by reviewing the PREA logbooks which are onsite and as part of the pre-audit information provided prior to the onsite visit. Auditor interviews with inmates indicated that female staff entering the housing units make the required cross gender announcements.

Conclusion: The Auditor reviewed the ORCC policies, procedures, population reports, interviewed staff and inmates, and made observations to determine the facility meets the requirements of this standard.

115.16

Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials, Interviews, Policies and Other Evidence Reviewed:

Policy AD 06.06 Prison Rape Elimination Act

AD 01.13 Accommodations for Persons with Disabilities

Competed ORCC PAQ

Language service Contracts (5997-002,003,000)

AD 07.02 Employee Training Program

ADA and Correctional Facilities guidelines

Staff Interviews

Inmate Interviews

Observations

AD 01.14 Language Services

ORCC policy requires staff take appropriate steps to ensure inmates with disabilities or limited English proficiency have an equal opportunity to participate in or benefit from all aspects of the ORCC's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy requires the inclusion of those who are deaf or hard of hearing, blind or low vision, and those who have intellectual, psychiatric, or speech disabilities.

ORCC policy is written in accordance with this standard and states that during the booking process, inmates determined to have disabilities will have accommodations made to ensure that materials are distributed through a method that is clear and provides concise communication. The PREA coordinator and accreditation manager stated that if they receive an inmate with a disability, Intake staff would make all necessary accommodations and notifications to appropriate staff.

The Auditor interviewed correctional staff, supervisory staff and Intake deputies who confirmed that they have a course of action in place to ensure that all inmates, regardless of disability would have equal access to PREA information. Auditors observed PREA informational posters throughout the facility in both English and Spanish. Interviews with staff responsible for intake and classification documents confirmed that inmates with disabilities were provided access to the PREA program and that they provide these choices on a case-by-case basis. When staff were asked how they would respond to the needs of an individual with a cognitive disorder or severe mental illness, staff stated that it would depend on the level of impairment and the exact communication requirements of the inmate, and they would read and explain the information.

	<p>ORCC policy maintains that inmates who are LEP have access to all the facility's efforts to prevent, detect and respond to sexual abuse and harassment, including providing interpreters. Through staff interviews, it was determined that ORCC has interpreters available for LEP inmates by means of a Language Service contract. According to the submitted PAQ, the facility has three interpretive language services and also provides PREA information in braille format.</p> <p>CONCLUSION: The Auditor conducted a review of policies, procedures, training, made observations, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Policy AD 06.06 Prison Rape Elimination Act</p> <p>Policy AD 03.30 Employment, Recruitment, Selection and Promotion</p> <p>AD 03.24 Criminal History Inquiry</p> <p>Approved Volunteer and Contractor List</p> <p>Ad 03.24 Criminal History Pre-Employment Background Information</p> <p>Employee Records</p> <p>Contractor Records</p> <p>Interview with Staff</p> <p>Interview with Contractors</p> <p>App4-Duty to Disclose form</p> <p>The Auditor reviewed documentation used by the facility for staff pre-employment and promotional purposes. The facility requires each applicant to complete a Pre-employment background Information questionnaire prior to access to the facility. The ORCC policy prohibits hiring anyone or enlisting the services of any contractor or volunteer who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in U.S.C. 1997),</p>

been convicted of engaging or attempting to engage in sexual activity in the community which was facilitated by force, overt or implied threats of force or coercion, if the victim did not consent or was unable to consent or refuse, or been civilly or administratively adjudicated to have engaged in the activities described above. Each candidate is required to complete the Duty to Disclose Misconduct form prior to working in the facility.

The Auditor randomly chose the records of two staff members for review. The folder verified that each staff member was required to complete the facility's Pre-Employment Background Information questionnaire prior to employment and the (Duty to Disclose Misconduct) form. The Auditor observed that employees complete the form on an annual basis and prior to any date of promotion. The Auditor reviewed the records of contractors and confirmed the facility conducted a criminal record background check through the Maryland Criminal Information Network and National Crime Information Center on each applicant prior to enlisting their services. The Auditor verified all current employees had a criminal record background check conducted within the previous 5 years.

ORCC policy states that they will consider any instances of sexual harassment in determining whether to hire or promote anyone or enlist the services of contractors who may have contact with inmates. The Auditor interviewed Human Resources staff who confirmed that instances of sexual harassment would be a factor when making decisions about hiring and/or promotion. All potential employees and contractors undergo a background check and are not offered employment if disqualifying information is discovered.

In addition, ORCC utilizes a checklist for the background process which verifies steps that have been completed, including the criminal history check. HR staff stated that if a prospective applicant previously worked at another correctional institutional, they make every effort to contact the facility for information on the employee's work history and any potential issues, including allegations of sexual assault or harassment, or resignation during a pending investigation. In accordance with the standard, ORCC policy stipulates that omissions regarding such conduct or the provision of materially false information shall be grounds for termination. ORCC policy requires that the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. HR Staff indicated they share information upon request from another facility regarding a former employee.

The Human Resource manager confirmed that all promotional candidates are screened in accordance with the applicable standard and ORCC maintains written proof of all inquiries which are placed in the candidate's personnel file. All personnel that are responsible for conducting such inquiries are trained in accordance with the standards. The Auditor concluded that ORCC is performing appropriate practices to identify previous acts of sexual misconduct prior to hiring staff, enlisting the services of contractors, or promoting staff members.

	<p>Conclusion: The Auditor conducted a review of the facility's policies, procedures, employment records, forms, interviewed staff & contractors and determined the facility meets the requirements of this standard.</p>
--	---

115.18	Upgrades to facilities and technologies
---------------	--

	<p>Auditor Overall Determination: Meets Standard</p>
--	---

	<p>Auditor Discussion</p>
--	----------------------------------

	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>ORCC Policy AD 06.06 Prison Rape Elimination Act</p> <p>AACO ORCC Master Drawings</p> <p>Camera diagram</p> <p>Interviews with Staff</p> <p>Observations</p> <p>Interviews with PREA Coordinator and Facility Administrator</p> <p>Completed ORCC Pre-Audit Questionnaire</p> <p>ORCC policy states that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the effect of the design, acquisition, expansion, or modification and the facility's ability to protect inmates from sexual abuse, shall be considered. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the ability to protect inmates from sexual abuse shall be carefully reviewed.</p> <p>Through interviews with the facility PREA coordinator and facility PREA compliance manager, it was noted that the facility Plant Supervisor and the PREA manager would discuss any projects at the facility to ensure compliance with the PREA standards. There have been installations and upgrades to the facility video surveillance system and PREA consideration was considered during the approval process.</p> <p>Conclusion: The Auditor conducted a review of the facility's policies, procedures, tour observations, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.</p>
--	---

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>ORCC Policy AD 06.06 Prison Rape Elimination Act</p> <p>PREA Supervisor Report</p> <p>Specialized Training Programs</p> <p>Employee Training Programs</p> <p>ACPD Agreement</p> <p>Baltimore Washington Hospital Agreement</p> <p>MOU Agreement YWCA</p> <p>According to ORCC policy, investigators conduct administrative investigations of sexual abuse and sexual harassment. ORCC has an agreement with the Arundel County Police Department to conduct criminal investigations of sexual abuse at the facility. ORCC staff are responsible for preserving any crime scene until an Arundale County Police Investigator arrives to process the scene. The MOU signed by the correctional Facility Administrator and Chief of Police remains in force until either party terminates in writing and the agreement may be amended as mutually agreed upon by both parties. The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol.</p> <p>ORCC policy states that the facility will follow a uniform evidence protocol which maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol is required to be developmentally appropriate for youth where applicable. When appropriate, will be adopted 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. The Auditor reviewed the facility's policy regarding evidence control which addresses appropriate measures during the initial seizure, through the disposition of evidence. Facility personnel are trained on how to protect evidence in any crime scene related to sexual abuse.</p> <p>The Auditor interviewed the Health Services Administrator to verify if Wellpath medical personnel conduct forensic examinations and was informed that Wellpath medical personnel do not conduct forensic examinations. Medical personnel stated that a SANE nurse with the Baltimore Washington Hospital Network would be</p>

	<p>contacted to conduct forensic examinations at their medical center. ORCC policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam without financial cost including prophylactic testing/treatment for suspected STIs, and pregnancy testing as applicable. Examinations will be conducted by qualified SANE/SAFE experts in accordance with the DOJ guidelines of The National Protocol for Sexual Assault Medical Forensic Examinations. Pursuant to the MOU, persons performing these exams will be either Registered Nurses licensed by their respective State Board of Nursing and possess training and/or certification in the Sexual Assault Nurse Examination or a Physician with training specific to the sexual assault medical forensic examination. ORCC has access to SANE/SAFE nurses who are available 24 hours per day and 7 days per week and there are no charges to the victim for these exams and the availability of these services was confirmed by the HSA. There have been no cases that required forensic exams during this audit cycle.</p> <p>ORCC policy states a victim advocate from a rape crisis center will be available to an inmate victim and ORCC has a signed MOU signed with the YWCA to provide support services and serve as a victim advocate to victims of sexual assault if it occurs at ORCC. The joint agreement remains in effect until either party terminates in writing or the agreement may be amended as mutually agreed upon by both parties. It is stipulated in the MOU that the YWCA is available to provide an advocaat that will accompany and support the victim through the forensic exam process if requested and shall provide any requested emotional support or crisis intervention services.</p> <p>The Auditor determined an appropriate evidence protocol is used when collecting forensic evidence following a sexual abuse incident and ORCC allows inmates access to a victim advocate from a rape crisis center. The facility provides access to a Sexual Assault Nurse Examiner through the Baltimore Washington Medical Center.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, MOU's, investigative records and conducted interviews with investigators, SANE, victim advocate and medical personnel. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>PREA Incident Checklist</p>

Allegation Tracking and Monitoring form

Investigative Files

Interviews with Staff and Inmates

Facility Website

ACPD Agreement

30 Day Review

The Auditor reviewed the ORCC website which provides a link with information regarding the facility's policies related to conducting investigations of sexual abuse and sexual harassment allegations. The website states that ORCC refers allegations of sexual abuse to the Arundel County Police Department for criminal investigation and that the ORCC investigates any allegation that does not involve potential criminal behavior.

The ORCC has a policy to ensure an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The facility's policy is to notify the Arundel Police Department of any allegation of sexual abuse or sexual harassment to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. ORCC personnel are required to document all referrals to the Arundel County Police Department who has the legal authority to conduct criminal investigations. The Auditor interviewed a facility investigator and asked what protocol is utilized if the facility investigator determines the act was potentially criminal in nature. The investigator informed the Auditor that the ACPD would be immediately contacted, and the administrative investigation would cease to allow the criminal investigation to be conducted.

ORCC reported allegations of sexual abuse and sexual harassment that were received during the previous 12 months, were reviewed by the Auditor and all investigative records were unsubstantiated

The Auditor concluded the ORCC is appropriately referring criminal allegations of sexual abuse and sexual harassment to the ACPD and that the ORCC has the legal authority to conduct such referrals. The Auditor observed documentation that verified the facility is investigating all allegations of sexual abuse and sexual harassment and there is not a Department of Justice component responsible for conducting administrative or criminal investigations at the facility. Review of policy, investigative reports, interviews with the Correctional Facility Administrator and investigators, verified that any suspicion or knowledge of sexual abuse, sexual harassment, neglect, or retaliation will be reported.

Conclusion: After reviewing facility policies, procedures, facility website, investigative reports and interviewing staff and inmates, the Auditor determined the facility meets the requirements of this standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>AD 07.01 General Administration</p> <p>AD 07.02 Employee Training Programs</p> <p>AD 07.03 Specialized Training Programs</p> <p>Maintaining Security Lesson Plan</p> <p>Power Point PREA LGBTQ 101</p> <p>2022 E Learning Refresher</p> <p>ORCC Screening Form</p> <p>Observations</p> <p>Attendance Roster</p> <p>PREA Mandated Disclosure Form</p> <p>PREA In-service Completion Report</p> <p>The ORCC policy is written in accordance with PREA standard 115.31 and includes all required topics and elements. ORCC policy requires that all employees, contractors, volunteers, and civilian staff members who have contact with inmates receive training relevant to sexual abuse and harassment. According to ORCC policy, mental health and medical personnel receive specialized training that is tailored to both male and female inmates. The facility provides PREA training annually through classroom attendance and electronically to each employee to ensure they remain current on the policies and procedures regarding sexual abuse and harassment. The training for current employees is self-paced computer courses and annual in-house classroom attendance. Each employee must complete all PREA training courses and electronic CEU's required by the facility.</p> <p>The ORCC policy states that all employees who regularly enter the facility will be trained in accordance with the facility's prevention, detection, response, reporting, investigation, and sanctions related to sexual assault/abuse/misconduct/harassment policies and procedures. Training is required and provided by the training academy staff during new employee orientation and during refresher periods. Policy states employees are responsible for understanding and preventing sexual abusive behavior and awareness of environment, detection of incidents of sexual abuse, behavior that may lead to abuse, and being responsive to inmate reporting.</p>

	<p>The Auditor reviewed facility training rosters for all employees who had received training during the current year with no deficiencies noted. Newly hired staff are given PREA training during their orientation before assuming work assignments. They are required to sign a verification form acknowledging they have received the employment information. Interviews with the PREA coordinator and training staff confirmed that an employee is not permitted to have contact with inmates prior to receiving the PREA training during orientation.</p> <p>Conclusion: The Auditor reviewed facility policies, procedures, lesson plans, training records, acknowledgement forms, interviewed staff and inmates, made observations, and determined the facility meets the requirements of this standard.</p>
--	--

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>AD 07.01 General Administration</p> <p>AD 07.02 Employee Training Programs</p> <p>AD 07.03 Specialized Training Programs</p> <p>PREA Training for Contractors & Volunteers</p> <p>PREA Information Materials Acknowledgement Form</p> <p>Training Records & Attendance Sheets</p> <p>Interviews with Contractors & Volunteers</p> <p>The ORCC policy is written in accordance with PREA standard 115.32 and includes PREA related topics and elements that require all staff receive training regarding PREA. This training is to be completed in person prior to contact with any inmates and is tailored to both male and female inmates. The facility provides PREA training annually to each contract employee to ensure they remain current on the ORCC policies and procedures regarding sexual abuse and harassment.</p> <p>The ORCC's policy requires all contractors and volunteers who have contact with inmates receive training relevant to their responsibility to prevent, detect, monitor, report allegations, and incidents of sexual abuse/sexual harassment of inmates. Policy states the level and type of training provided is based on the services and amount of contact they have with inmates. Volunteers and contractors who have contact with inmates are trained on the facility's zero-tolerance regarding sexual</p>

	<p>abuse and sexual harassment and how to report and document incidents.</p> <p>The Auditor reviewed the training curriculum and verified it included information required by the standard. The Auditor reviewed the training rosters and random training files, to verify contracted employees are receiving the mandated PREA training. During the document review, the Auditor was able to verify that the contractors had signed the Acknowledgement Form confirming they had received and understood the PREA training. The Auditor reviewed the files of contract employees and verified that they had signed the training form and that it was retained in their files.</p> <p>The contract staff interviewed by the Auditor, were knowledgeable regarding the PREA information they had received and appear to understand their responsibilities regarding the standards. ORCC is providing training in accordance with the standard and documentation is maintained accordingly. The Auditor concluded the facility is appropriately training volunteers and contractors and the training curriculum is based on PREA educational information. The facility maintains documentation that volunteers and contractors have received training.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, training curriculum, training records, and interviewed contractors. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Allegation Tracking and Monitoring Form</p> <p>AD 06.06 Sexual Abuse and Sexual Harassment</p> <p>ORCC Inmate Orientation Video</p> <p>Inmate Orientation Booklet</p> <p>Inmate Orientation Form</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Inmate signed Acknowledgment Rosters</p>

	<p>The ORCC policy is written in accordance with PREA standard 115.33, and states inmates receive training regarding the facility's Zero tolerance policy upon arrival at the facility. The PREA information is provided through inmate handbooks, informational posters, staff, and videos. The avenues utilized provide inmates with information regarding sexual abuse and assault, the Facility's Zero Tolerance policy, and how to report incidents of sexual abuse or harassment while incarcerated. The Auditor observed PREA informational posters in inmate housing areas, intake area, and medical. The inmate handbook is available in standard format and Braille both in English and Spanish.</p> <p>The Auditor reviewed the intake process during the site review and observed PREA signage with a number for reporting PREA allegations and notification of the facility's Zero tolerance policy. During interviews with intake staff, the Auditor confirmed that the facility's Zero-Tolerance policy regarding sexual abuse and harassment is provided by the classification officer who issues documents, obtains inmate signatures, and conducts PREA orientation class.</p> <p>ORCC policy requires the inmate acknowledge receiving the "Preventing Sexual Abuse and Sexual Assault" training by signing an acknowledgement form and inmates transferred from another facility will be offered comprehensive PREA training within 72 hours of intake.</p> <p>The Auditor reviewed a sampling of random inmate files which contained documentation of the initial inmate PREA orientation at the time of admission as well as the comprehensive education. Inmates at ORCC have received PREA training and interviews indicate that most remember receiving information upon arrival. The inmates interviewed stated they are aware of PREA information availability and how to report.</p> <p>As required by policy, PREA education is provided in formats accessible to all inmates. As indicated in the policy, any language barrier or special needs would be handled in coordination with the PREA coordinator on a case-by-case basis. There have been no instances to accommodate special needs prisoners during this audit period.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, inmate handbook, Inmate training, acknowledgement form, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials, Interviews, Policies and Other Evidence Reviewed:

AD 06.06 Sexual Abuse and Sexual Harassment

PREA Supervisor Report

AD 07.01 General Admission

AD 07.02 Employee Training Programs

PREA Special Investigations Training

ACPD Memorandum of Understanding

Training Records

Investigator interviews

The ORCC PREA policy requires that when investigating allegations of sexual abuse, assigned investigators to the case will have received special training in Sexual Abuse Investigations pursuant to PREA Standard 115.34. The facility's Special Investigations policy requires special training for staff who conduct sexual abuse investigations.

The Auditor verified during review of training documentation that the facility is providing specialized training for investigators who conduct the investigations. The specialized training included Miranda and Garrity, Evidence collection in a correctional setting, and Evidentiary standards protocol for administrative findings. An interview was conducted with an ORCC investigator who was knowledgeable in the training provided and was able to articulate the proper protocol for conducting investigations. Facility supervisors conduct administrative investigations of sexual abuse and sexual harassment, and the Arundel County Police Department conducts criminal investigations of sexual abuse at the facility.

The ORCC maintains an MOU with the ACPD to conduct criminal investigations and the MOU requires that the Arundel County Police Department investigators receive specialized training to conduct investigations of sexual abuse in confinement settings.

The Auditor conducted a formal interview with a facility investigator who stated each investigator is required to obtain the specialized training certification which is maintained by the National Institute of Corrections (NIC). The training is an online based training titled, "PREA: Investigating Sexual Abuse in a Confinement Setting."

Conclusion: The Auditor concluded the facility has provided appropriate training to their investigators assigned to conduct sexual abuse investigations. The Auditor conducted a review of policies, procedures, training records, curriculum, MOU, interviewed investigators, and determined the facility meets the requirements of this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials, Interviews, Policies and Other Evidence Reviewed:

AD 06.06 Sexual Abuse and Sexual Harassment

PREA Supervisor Report

OD 07.01 Mental Health Services

AD 07.02 Employee Training Programs

OD 17.02 Behavioral Observation Unit

PowerPoint training

Training Records

Interviews with Medical & Mental Health staff

Medical and mental health services at the ORCC are provided by Wellpath Care corporation. Wellpath staff are required to complete specialized medical training referencing PREA policy offered by their company and ORCC training. Review of training records reveal each medical and mental health staff member had completed the specialized training offered to ORCC employees during their initial orientation and prior to performing services in the facility.

ORCC policy requires that all staff members receive PREA training in accordance with standard 115.31 and all full-time and part-time medical and mental health staff who work regularly in the facility, receive specialized training dealing with victims of sexual abuse. All medical and mental health practitioners in the facility are required to receive the training mandated for the ORCC staff under PREA standard 115.31 or training mandated for contractors and volunteers under PREA standard 115.32, contingent upon their position at the facility.

ORCC policies require that all part-time and full-time mental health and medical staff members receive additional specialized training on how to detect and assess signs of sexual abuse and harassment, preserve physical evidence, respond effectively to victims of sexual abuse or harassment, and how to report. The Auditor verified through review of training logs provided by the training department, that medical and mental health staff received the specialized training. The Auditor cross-referenced the training roster for mental health and medical personnel and verified that employees had received the required training. The facility maintains documentation that medical and mental health practitioners have received the specialized medical training and forensic exams are not performed at ORCC therefore medical staff are not required to receive Forensic Examination specialized training

Conclusion. The Auditor conducted a review of the facility training records, interviewed staff and determined the facility meets the requirements of this standard.

--	--

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Medical Screening and Access to Medical Service</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>PREA 360 Assessment Questionnaire Form</p> <p>PREA Allegation Tracking and Monitoring Form</p> <p>Interviews with Staff and Inmates</p> <p>SOD 13.0B Intake Services</p> <p>SOD 13.0E Reviews, Reassessments and Reclassification</p> <p>SOD 01. OD Administrative Segregation</p> <p>ORCC Screening Instrument Form</p> <p>Inmate Signature Sheets</p> <p>HRSA/HRSV logs</p> <p>30-day Reassessment</p> <p>ORCC policy states all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with standard 115.41 and includes all the required elements. Interviews with the medical staff and intake staff verified that within 72 hours of admissions, all inmates are screened for risk of sexual abuse, victimization, and the potential for predatory behavior. Interviews with inmates confirmed they were asked the risk screening questions during the intake process. Inmates may not be disciplined for refusing to answer or for not disclosing complete information in response to questions asked.</p> <p>The PREA risk screenings are completed by intake staff in the receiving department during the initial booking process. The information obtained from the screening is also used by medical staff to assist in recommendations for housing decisions and referrals. The Auditor reviewed this information and verified it is maintained</p>

	<p>electronically with limited access. Appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard have been implemented to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.</p> <p>ORCC policy states the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, when assessing the risk of inmates being potential abusers. The Auditor reviewed the objective screening instrument and verified that the elements required are present on the screening instrument and completed forms were documented in the inmate files.</p> <p>The PREA compliance manager stated an assessment is conducted with inmates within 72 hours of arriving at the facility and a reassessment is made after receiving a request, referral, or any additional information that influences an inmate's risk level. The PREA coordinator confirmed that 30-day reassessments are being completed on inmates by the classification officers. The Auditor reviewed facility records of 30-day reassessments to determine timely completion.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, initial screening forms, 30-day reassessments, activity log, classification records, and interviewed staff, and interviewed inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	---

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>SOD 13. OB Intake Services</p> <p>SOD 13. OE Reviews, Reassessments and Reclassification</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>ORCC PREA Screening Form</p> <p>Interviews with Staff and Inmates</p> <p>Observations</p> <p>Medical PREA Intake Screening /CorEMR</p> <p>Transgender Committee Report</p> <p>Unit Shift Logbooks</p>

PREA Assessment Questionnaire

HRSA/HRSV roster

The ORCC policy requires that screening information from the PREA risk assessment is used in making housing, bed, work, education, and programming assignments. Both medical staff and Intake/Booking officers are required to complete a risk assessment screening upon the inmate being processed into the facility and medical staff use this information to make recommendations on housing, assignments, programs, and referrals. The risk screenings are completed by medical staff at the time of the health assessment and are electronically filed in CorEMR system, which is the medical system utilized by medical staff only. This screening is also used by medical staff to assist in recommendations for HRSA/HRSV housing decisions and referrals. Medical staff conduct a PREA screening as part of the intake process and Wellpath medical protocol directives. The Auditor reviewed this information and verified it is maintained electronically with limited access. Appropriate controls on the dissemination within the facility of inmate responses to questions asked pursuant to this standard, have been implemented to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. Interviews conducted with classification staff confirmed that the results of the risk assessment and initial interview with the inmate is used to determine classification decisions and make individualized determinations for inmates on a case-by-case basis.

ORCC policy states that the facility will consider unit assignments for transgender or intersex inmates on a case-by-case basis to ensure the health and safety of the inmate and prevent any potential management or security problems. The policy requires that a transgender or intersex inmate's own view about their safety shall be given serious consideration and that all transgender or intersex inmates are given the opportunity to shower separately from other inmates. The Auditor toured inmate housing units and confirmed that housing unit staff would allow transgender and intersex inmates to shower separately from other inmates.

The ORCC policy states that LGBTQI inmates will not be placed in a dedicated facility, unit, or wing solely based on identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting the inmates. Staff are aware of their responsibilities should they receive a transgender inmate regarding this standard. Interviews with facility staff indicate they are aware that placement of any transgender or intersex inmates would be made on a case-by-case basis. ORCC policy stipulates that placement and programming assignments for transgender inmates will be reassessed at least twice a year to review any threats to safety and views with respect to his or her safety will be given serious consideration. LGBTQI inmates are not placed in dedicated housing areas and interviews with staff confirm that ORCC does not use dedicated housing as a means of separation.

At the time of the audit the facility was not under a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender or intersex inmates. The Auditor concluded staff are making individualized

	<p>determinations when assigning inmate's housing, bed, work, and programming assignments. The facility has appropriate policies, procedures, and practices in place to protect vulnerable inmates from those identified as potential sexual abusers.</p> <p>Conclusion: The Auditor conducted a review of policies, procedures, classification records, intake assessment, observations, interviewed staff, and interviewed inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>SEG Memo</p> <p>ORCC PO 06 A4, A5, B1JUV Male Restrictive Housing</p> <p>Offender 360 HRSV/HRSA Assessment</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Observations</p> <p>Unit Logs</p> <p>SOD 01.0E Protective Custody</p> <p>ORCC policy states that the facility will not place inmates who are at high risk for sexual victimization in restrictive housing unless all alternatives have been considered and are not available. ORCC policies are written in accordance with Standard 115.43 and cover all mandated stipulations. ORCC's completed PAQ indicates there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers.</p> <p>Interviewed staff verified that any inmate identified as High Risk would be moved to another housing location and not placed in segregation unless the inmate requested it. During the interview with the PREA Coordinator it was confirmed that ORCC does not have a Special Management Unit and if the need arose, the inmate would be transferred.</p> <p>The ORCC policy states that if inmates were placed in restrictive housing for involuntary protective purposes, they would be permitted programs, privileges, and any restrictions would be limited. The policy states that such an involuntary housing</p>

	<p>assignment would not normally exceed 30 days and such a placement would be documented to include the justification for such placement and why no alternative could be arranged. According to the policy, if an inmate is confined involuntarily under these circumstances, the facility shall review the continuing need every 30 days and classification staff are required to conduct a review every 30 days to determine whether there is a continuing need for separation from the general population. Policy requires a personal interview and medical evaluation is conducted when an inmate remains in administrative segregation or disciplinary detention beyond 15 days and every 15 days thereafter. Staff interviewed are aware of their responsibilities regarding this standard, including the need for a review every 30 days.</p> <p>The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization have access to work, programming, and other privileges afforded to the general population when housed in involuntary protective custody.</p> <p>Conclusion: The Auditor reviewed the facility’s policy, records and conducted interviews. The Auditor determined the facility meets the requirements of the standard.</p>
--	--

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>ORCC Inmate Orientation Booklet</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>ORCC PO General Orders</p> <p>Central Grievance Log</p> <p>Inmate Education Materials</p> <p>Zero-Tolerance Poster</p> <p>Staff Training Materials</p> <p>Cooperative Agreement MOU YWCA</p> <p>Investigative Records</p> <p>Interviews Staff and Inmates</p>

Immigrant MOU

ORCC policy states facilities must provide multiple internal ways for inmates to privately report sexual abuse or sexual harassment, retaliation for reporting, and staff neglect or violation of responsibilities which may have contributed to such incidents.

During interviews with both inmates and staff, it was clear that these options are well publicized throughout the facility. The ORCC Facility Director designates multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff for reporting, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse. The ORCC directive stipulates that inmates may privately report sexual abuse, sexual harassment, retaliation for reporting, and staff neglect, or dereliction of duty that may have contributed to such incidents. They are afforded the opportunity to report verbally, in writing, anonymously or through third parties. Inmates can file such reports through verbal or written reports to any staff member, the ORCC Sexual Abuse Hotline, or through third parties.

The inmate grievance procedure is one way in which inmates can privately report sexual abuse and sexual harassment, retaliation by other inmates, retaliation from staff for reporting, or any staff neglect or violation of responsibilities that may have contributed to such incidents. Inmates are not required to resolve an incident of sexual abuse or sexual harassment with staff or submit the grievance to the staff member who is the subject of their sexual abuse or sexual harassment allegation. Grievances regarding sexual abuse or sexual harassment will not be referred to the staff member who is the subject of the grievance and they will not be charged for filing a grievance regarding sexual abuse or sexual harassment unless it is determined that it was filed in bad faith.

When receiving any report of sexual abuse or sexual harassment, regardless of the source, staff shall promptly document and forward the complaint to the appropriate supervisory staff for investigation. The facility permits PREA allegations to be reported verbally to staff, PREA hotline, grievance procedures, and correspondence directly to the Arundel County Police department.

During interviews with facility staff, the Auditor determined that staff were aware of their obligations to accept reports from inmates and most inmates interviewed stated they were comfortable making a report to a staff member. Staff and inmates were aware of their ability to make written reports through the various available means and were aware of the PREA hotline. This Auditor reviewed facility investigations and verified multiple forms for inmate reporting. During the tour, adequate reporting hotline posters were prominently displayed throughout the facility.

Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or the Facility Administrator. Staff can also report sexual abuse or harassment through the established hotline and staff members are informed of this provision during PREA training. Staff interviews revealed that they are aware they can go directly to facility administration, including the PREA coordinator to report

	<p>sexual abuse or harassment of inmates.</p> <p>During inmate interviews, inmates stated that they felt comfortable talking to staff if they had any issue. Several expressed that they felt safe and were aware of the PREA safety postings on the bulletin boards in the housing units, dining hall, and other shared areas. According to the Civil Immigration Memo, the facility does not house inmates for immigration purposes.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, inmate handbook, grievances, investigative records, conducted interviews with staff and interviewed inmates to determine the facility meets the requirements of this standard.</p>
--	--

115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>OD 12.01 Inmate Grievance and Appeals</p> <p>ORCC Inmate Orientation Booklet</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>Grievance Log</p> <p>Inmate Education Materials</p> <p>Informal Complaint Resolution-Orientation Booklet</p> <p>Investigative Records</p> <p>Interviews Staff and Inmates</p> <p>Grievance Memo</p> <p>SOD 01.0F Disciplinary Segregation</p> <p>PREA Allegation Tracking and Monitoring</p> <p>ORCC policy states they have a grievance procedure in place for addressing inmate grievances regarding sexual abuse. If inmates utilize the grievance system to report an allegation of sexual abuse, the facility Grievance Coordinator shall forward the sexual abuse allegation to the facility PREA coordinator for further review in</p>

	<p>accordance with this policy and the inmate shall be notified in writing. The Inmates are not required to use an informal grievance process to resolve an alleged incident of sexual abuse and are not required to submit a grievance to a staff member who is the subject of a complaint.</p> <p>The facility issues a final decision within 90 days of the initial filing of the grievance which will not include the inmate’s time preparing an administrative appeal. If the facility claims an extension of time to respond, they will notify the inmate in writing of the extension and provide a date by which a decision will be made.</p> <p>Third parties are permitted to assist inmates in filing requests for administrative remedies, and to file such requests on behalf of an inmate. Emergency grievances may be filed if an inmate alleges that he is at substantial risk of imminent sexual abuse. Emergency grievances are immediately forwarded to an administrative level of review at which corrective action can be taken, in which a response is provided within 48 hours and a final facility decision is issued within seven calendar days.</p> <p>Conclusion: Based on the review of policies, investigations, notification of the investigation findings, interviews and analysis The Auditor has determined the facility has demonstrated compliance and meets this standard.</p>
--	---

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>OD 12.01 Inmate Grievance and Appeals</p> <p>Signed MOU YWCA</p> <p>ORCC Inmate Orientation Booklet</p> <p>Inmate reporting Information doc.</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>Grievance Log</p> <p>Inmate Education Materials</p> <p>PREA Orientation</p> <p>Zero-Tolerance Poster</p> <p>MOU Baltimore Washington Hospital</p>

	<p>Arundel Co, Police Dept. Agreement</p> <p>Investigative Records</p> <p>Interviews Staff and Inmates</p> <p>ORCC policy stipulates inmates may write to the PREA compliance manager or Mental Health staff for access to confidential support services. Communications between inmates and the organizations are conducted in a confidential manner. The ORCC policy states the facility shall inform inmates prior to giving them access to the information, the extent to which such communications will be monitored. They will also communicate the extent in which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. ORCC policy is written in accordance with PREA standard 115.53, and it states the facility will provide inmates with access to local, state, or national victim advocacy and rape crisis organizations with a toll-free number. The ORCC informs inmates of the degree to which these communications will be monitored prior to affording them access and inmates are provided information about the services during the intake process. Interviews conducted by the Auditor confirm they are aware of the services available to them.</p> <p>The Auditor reviewed the ORCC inmate handbook which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. The Auditor observed posters with information available for third-party reporting. ORCC policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially and these services are provided in multiple ways. Policy requires medical and mental health personnel to inform inmates of staff's limits of confidentiality when reporting. Interviews conducted with medical and mental health staff confirmed their understanding of obligation relevant to confidentiality limits.</p> <p>The facility provides emotional support services for sexual abuse victims through a written agreement with the YWCA. Contact information with the organization is provided to each inmate during Intake through the PREA education material provided and the Inmate handbook. The Auditor tested the inmate telephone system and the PREA Hotline for serviceability. Facility staff advised that calls to the YWCA are not recorded or monitored by the facility.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, YWCA agreement, inmate handbook, informational posters, telephone form, interviewed staff and Interviewed inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials, Interviews, Policies and Other Evidence Reviewed:

OD 12.01 Inmate Grievance and Appeals

ORCC Inmate Orientation Booklet

Inmate reporting Information doc.

AD 06.06 PREA Sexual Abuse and Sexual Harassment

Inmate PREA Orientation

DDF Website

Grievance Log

Inmate Education Materials

PREA Orientation

Zero-Tolerance Poster

MOU YWCA

Interviews Staff and Inmates

ORCC policy is written in accordance with the PREA standards and states that all third-party reports will be accepted and investigated. The ORCC publicly provides through their website a method for the receipt of third-party reports of sexual abuse or harassment. The ORCC allows third parties, including current inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests related to allegations of sexual abuse. The Auditor reviewed the ORCC website that contains a link to the PREA information which explains PREA and the facility's responsibility for criminal and administrative investigations.

Staff interviews reveal they are aware of their obligation to accept and immediately act on any third-party report received. Staff indicated they will accept a third-party report on behalf of an inmate from a family member, friend, or another inmate. Staff stated if they received information, they would document the information and inform their supervisor.

Inmates are provided this information during their intake process and inmate interviews indicate that they are aware that family or friends can call or write the facility to report an incident of sexual abuse on their behalf. Inmates interviewed stated they felt that staff would respond to any reports received and the staff take PREA and inmate safety seriously. The public is informed on how to report a PREA allegation through the facility's website via the link on how to make third-party reports on behalf of inmates. ORCC has not received any third-party reports of sexual assault or harassment during this reporting period.

	<p>Conclusion:</p> <p>The Auditor reviewed the facility’s policies, procedures, website, investigative reports, training, education documents, inmate handbook, informational posters, conducted interviews with staff, contractors, and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>Employee Training</p> <p>DDF Website</p> <p>Interviews</p> <p>Medical Training</p> <p>ORCC policy is written in accordance with standard 115.61 and requires all staff, contractors, and volunteers immediately report to a supervisor, any knowledge, suspicion, or information related to sexual abuse or harassment. During the site review, staff interviewed confirmed they were required by policy to report any instances or suspicions of sexual abuse or harassment. The Auditor interviewed contract staff referencing their responsibility to report any suspicion or knowledge of sexual abuse or harassment and they confirmed they would report as soon as they were made aware of the incident. Interviews with staff indicated they are knowledgeable of their duties and responsibilities to report PREA-related information, including anonymous and third-party allegation reports. Interviewed staff stated they were obligated to report any allegations or suspicions without relevance to who it involved. Facility staff understood their responsibility to report any information immediately and document in a written report.</p> <p>ORCC policy requires confidentiality of all information relevant to sexual abuse or harassment beyond what is required to be shared as a part of the reporting process, treatment, or investigation. Staff confirmed during interviews the requirement to maintain confidentiality and the need to keep the information limited to those that need to know and preserve the integrity of the investigation. Staff interviewed stated that all information related to inmate or staff allegations should remain confidential. When asked who they report or discuss details of a sexual abuse or sexual</p>

	<p>harassment allegations with, staff informed the Auditor they only discuss details with supervisors and investigators and would not discuss it amongst other co-workers. The PREA coordinator and Accreditation Manager verified that all investigative files are kept in locked cabinets and on secured computer servers that have limited access by authorized staff.</p> <p>ORCC policy requires that all medical and mental health personnel explain the mandatory reporting requirements and limits of health care staff confidentiality to victims of sexual abuse. Interviews with medical staff indicate they are aware of their mandatory reporting requirements, and they comply with the mandate to disclose the limits of their confidentiality to inmates. Medical staff are aware of their responsibilities to report information, knowledge, or suspicions of sexual abuse, sexual harassment, retaliation, staff neglect, or violations of responsibilities which may have contributed to an incident.</p> <p>Interviews with the PREA coordinator and staff verified that the facility reports all allegations of sexual abuse or harassment received and information received from a third party is referred for investigation in a timely manner. The staff reporting the incident and shift supervisor create a report that is forwarded to the PREA coordinator for review and dissemination of further action to be taken. The Auditor conducted an interview with a facility investigator who indicated that all allegations are immediately reported and investigated. The Auditor reviewed the investigative files and determined that they were promptly investigated. Medical and mental health practitioners are required to report allegations of victims under the age of 18 to the designated state or local services agencies under applicable mandatory reporting laws and to the local Department of Social Services.</p> <p>The Auditor concluded that staff and contractors are aware of the requirement to report any knowledge, suspicion, or information related to sexual abuse or sexual harassment and understand the requirement to maintain confidentiality. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse which occurs in the community, in a confinement setting, and those of inmates under the age of 18.</p> <p>Conclusion: The Auditor reviewed facility policies, procedures, investigative reports, training materials, and conducted interviews with staff and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>OD 12.01 Inmate Grievance and Appeals</p>

Inmate Reporting Information Form

AD 06.06 PREA Sexual Abuse and Sexual Harassment

SOD 01. OE Protective Custody

Grievance Log

Memos

Notification Incident Form

Segregation Logs

Interviews Staff and Inmates

Staff training Rosters

ORCC policy is written in compliance with PREA standard 115.62 which requires whenever there is a report submitted referencing an incident of sexual abuse or harassment, the victim should be immediately protected. ORCC policies require that when staff learn an inmate is subject to substantial risk of imminent sexual abuse, the facility shall take immediate action to protect the inmate. Staff interviewed at ORCC were knowledgeable of their duties and responsibilities if they were made aware of an inmate being subject to substantial risk. Staff were able to articulate the steps they would take to protect the inmate, including separating the inmates and alerting appropriate staff of the situation immediately.

All staff were able to answer questions regarding what immediate action they would take if they learned an inmate was at imminent risk of sexual abuse. Higher level staff interviewed by the Auditor were knowledgeable of the options they have available to protect inmates if these circumstances were to arise at their facility. These options include relocating the inmate to a different housing unit at the facility or transferring the inmate to another facility. These situations would be determined on a case-by-case basis and with the best interest of the inmate in mind.

The facility requires medical and mental health professionals to immediately consult with the facility administrator or designee and recommend housing interventions or other immediate action to protect an inmate when it is determined the inmate is subject to a substantial risk. If medical staff determine during an assessment that an inmate is at risk of imminent sexual abuse or is considered at risk sexual victimization, they will work closely with the Facility Administrator and classification team to provide alternative housing placement. ORCC staff reported there have been no determinations made at the facility that an inmate was at substantial risk of imminent sexual abuse. The Auditor reviewed files and interviewed facility staff in reference to their protective custody protocol.

Conclusion:

The Auditor concluded the ORCC takes immediate and appropriate actions to ensure the protection of inmates who are identified at a substantial risk of imminent sexual

	<p>abuse. The Auditor reviewed facility policies, procedures, classification records, investigative records, housing records, conducted interviews with staff and inmates, made observations and determined the facility meets the requirements of this standard.</p>
--	---

115.63 Reporting to other confinement facilities	
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>Facility Notifications</p> <p>Notification MOU</p> <p>Interviews with Staff</p> <p>The ORCC policy is written in accordance with standard 115.63 and requires that if the Facility Administrator receives an allegation regarding an incident of sexual abuse that occurred at another facility, they must make notification to the institution alleged within 72 hours and document the notification. During this review period, the facility reported receiving no notifications from an inmate alleging sexual abuse while incarcerated at another facility. According to interviews with the Facility Administrator and PREA coordinator, they stated they would immediately report such an allegation and would make the required notifications with documentation. They confirmed their understanding of their responsibility to report allegations in accordance with standard 115.63.</p> <p>ORCC requires that if the Facility Administrator receives notice that a previously incarcerated inmate makes an allegation that sexual abuse had occurred at ORCC, the allegation would be investigated in accordance with the standard. The ORCC reported receiving no notifications in the past 12 months from another facility that one of their former inmates alleged being sexually abused while incarcerated at ORCC. Interviews with the Facility Administrator and PREA coordinator confirm the staff are aware of their responsibility to fully investigate allegations received from other facilities. Staff interviewed have complete understanding of their duties to immediately report any allegations of sexual abuse or harassment, which increases the likelihood that abuse will be detected, reported, and investigated.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures and determined the facility meets the requirements of this standard.</p>

115.64	Staff first responder duties
	<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 1118 376">Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p data-bbox="256 412 1018 443">AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p data-bbox="256 483 655 519">Staff First Responder Duties</p> <p data-bbox="256 555 756 591">Supervisor PREA Incident Checklist</p> <p data-bbox="256 627 831 663">PREA Allegation Tracking and Monitoring</p> <p data-bbox="256 698 647 734">Coordinated Response Plan</p> <p data-bbox="256 770 612 806">PREA Supervisors Report</p> <p data-bbox="256 842 959 878">First Report of Inmate Sexual Assault: Appendix 3</p> <p data-bbox="256 913 759 949">PREA In-Service Completion Report</p> <p data-bbox="256 985 552 1021">Interviews with Staff</p> <p data-bbox="256 1057 651 1093">Interviews with Contractors</p> <p data-bbox="256 1128 1437 1415">The ORCC policy is written in accordance with PREA standard 115.64 and describes actions staff should take in the event of learning an inmate has been sexually assaulted. ORCC Operating Directives requires that when an inmate reports an incident of sexual abuse, the responding staff member should separate the alleged victim and alleged abuser, preserve evidence, advise the victim not to take any actions that would destroy any evidence, and take action to prevent the alleged abuser from destroying evidence.</p> <p data-bbox="256 1451 1465 1653">There have not been any instances of reported sexual assault during this review period that required a first responder to preserve or collect physical evidence. All allegations for the previous 12 months were sexual harassment allegations and did not require evidence collection or medical treatment. There were no inmates present during the on-site portion of the audit who had reported sexual abuse at the facility.</p> <p data-bbox="256 1688 1481 2065">The Auditor interviewed correctional officers that are trained as first responders. They explained the steps they would take following an alleged sexual abuse if reported to them. The staff were knowledgeable and communicated the response protocol they would utilize during an incident which included separating the alleged perpetrator and victim, securing the scene, preserving potential evidence, and reporting methods. Staff stated the scene would be preserved and remain secured until the investigator arrived to investigate the incident. The PREA coordinator and investigator stated that once the initial steps were complete and the scene was secure, the Arundel County Police Department investigator would be notified depending on the</p>

	<p>nature of the investigation.</p> <p>The Auditor conducted interviews with supervisory staff and facility investigators to verify the supervisor's response and role following a report of sexual assault. The supervisory staff stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separated, the crime scene would be secured, and a staff member posted to ensure no one entered the area where the incident transpired. The alleged victim would be accessed by medical staff for treatment and transported to the local hospital for a forensic exam if needed. The supervisor stated the investigators would be the only ones allowed in the area in order to process the evidence and to prevent any evidence from the possibility of being destroyed.</p> <p>ORCC policy requires that if the first responder is not a security staff member, the responder immediately notifies a correctional staff member. There were no instances during the audit period where a non-security staff member acted as a first responder to an allegation of sexual abuse. The Auditor interviewed non-security personnel that stated if they were the first at a scene, they would ensure the victim remained with them and they would immediately inform a security officer. They stated they would also request the victim not take action to destroy evidence.</p> <p>Medical practitioners at the facility have received specialized training to preserve physical evidence while treating victims of sexual abuse. Medical staff explained how they would attempt to preserve evidence while treating a sexual abuse victim. Medical and mental health practitioners informed they would immediately notify a supervisor if they were the first person to be notified of an alleged sexual abuse. Medical personnel interviewed stated they would first ensure a victim's emergency medical needs are met and request the victim not to use the restroom, shower, or take any other actions which could destroy evidence and would be transported to the local hospital if forensic exams are needed.</p> <p>Conclusion:</p> <p>The Auditor determined both security and non-security personnel are knowledgeable of their duties as first responders during a PREA incident. The Auditor reviewed facility policies, procedures, investigative records, training records, and conducted interviews with staff and contractors. The Auditor determined the facility meets the requirements of this standard.</p>
--	---

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials, Interviews, Policies and Other Evidence Reviewed:
	AD 06.06 PREA-Sexual Abuse and Sexual Harassment

Supervisor PREA Incident Checklist

PREA Allegation Tracking and Monitoring

Coordinated Response Plan

PREA Supervisors Report

Interviews with Staff

Staffing Plan

First Report of Inmate Sexual Assault: Appendix 3

The ORCC policy requires a written plan to coordinate actions taken in response to an incident of sexual abuse. The facility has developed its own operating procedures for the coordinated response plan. ORCC policy describes the procedures employed by the facility when responding to allegations of sexual abuse among supervisory, investigative staff and facility leadership. A Sexual Assault First Responder Checklist has been created which supplements the facility operating procedures and outlines staff duties in response to a sexual assault incident. ORCC operating procedures institutional plan coordinates actions taken in response to an allegation of sexual abuse. The plan includes the following institutional staff:

1. Staff, Volunteer, and Contractor Responsibilities
2. First Responder (Security/Non-Security)
3. Watch Commander
4. Medical Response
5. Investigator
6. Mental Health
7. PREA Compliance Manager
8. Administrative Response

The Auditor conducted interviews with staff listed in the coordinated response plan and asked questions related to their specific duties in response to a sexual abuse incident. Each person interviewed was knowledgeable regarding their specific duties as required. The Auditor determined the facility has prepared its staff to take appropriate actions in response to sexual abuse. The Auditor found facility staff, volunteers and contractors have been appropriately trained in their responsibilities to respond to an allegation of sexual abuse. The Auditor verified that all facility personnel, volunteers, and contractors had received the training.

The Auditor interviewed the facility administrator, investigator, medical staff, mental health staff, and PREA coordinator, regarding the initiation of the coordinated response in the case of an allegation of sexual abuse or harassment. They all

	<p>understood their responsibilities and stated that all investigations are completed, and a finding is assigned. They stated that it may be referred for criminal prosecution or managed administratively. Staff stated that it could require medical and mental health services or monitoring for retaliation and that a notice to the inmate victim disclosing the outcome of the case, would be initiated. The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and trained its personnel to follow the plan. There have been no instances of reported sexual assault at ORCC for the previous 12 months.</p> <p>Conclusion: The Auditor determined the facility maintains an appropriate response plan that coordinates the actions of personnel following an incident of sexual abuse and has trained their personnel. Based on a review of the facility's policies, procedures, Coordinated Response Plan, Sexual Assault Response Checklist, training records, interviews with staff and inmates, the Auditor determined that facility meets the requirements of this standard.</p>
--	---

115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>CPS Contract</p> <p>FODCOP Contract</p> <p>Local 582 Contract</p> <p>Local2563 Contract</p> <p>Det Sgt. Contract</p> <p>Staff Interviews</p> <p>Maryland CBA-Collective Bargaining Agreement</p> <p>The State of Maryland has a collective bargaining agreement effective 2022-2025 with the Police Union for the State of Maryland. This Memorandum of Understanding (“MOU”) is entered into by the State of Maryland (“Employer”) and the State Law Enforcement Officers Labor Alliance (“Union”), and has as its purpose the promotion of harmonious relations between the Employer and the Union; the establishment of an equitable and peaceful procedure for the resolution of differences without</p>

	<p>disruption in the workplace; and includes the agreement of the parties on the standards of wages, hours and other terms and conditions of employment for the Bargaining Unit employees covered hereunder. The Employer recognizes the commitment of the Union and employees to organizational efficiency and high-quality services and will actively encourage the sharing of concerns regarding management practices, policies and procedures. This MOU, including any appendices hereto, applies to all departments / agencies of the State whose employees are in the Bargaining Unit covered by this MOU, except as to those provisions of this MOU that are expressly limited to a particular department / facility.</p> <p>The ORCC has not entered into any agreement that limits the facility's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The Auditor reviewed facility records that show the facility ensures personnel who have been alleged to have committed an act of sexual abuse are removed from contact with the alleged inmate victim.</p> <p>Conclusion: The Auditor concluded the ORCC has not entered any collective bargaining agreement that would restrict its ability to remove staff sexual abusers from contact with inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>Staff First Responder Duties</p> <p>Supervisor PREA Incident Checklist</p> <p>PREA Allegation Tracking and Monitoring</p> <p>Coordinated Response Plan</p> <p>PREA Supervisors Report</p> <p>PREA In-Service Completion Report</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p>

The facility's policy includes the requirements of PREA standard 115.67, that ensure inmates and staff are protected from retaliation by staff or other inmates for reporting an incident. The ORCC has designated the Administrative Captain as responsible for monitoring retaliation against inmates or staff. Those who report substantiated allegations of sexual abuse or harassment are protected from retaliation for making such reports. ORCC policy indicates that a specific person is designated as the staff monitor who will be responsible for monitoring retaliation for a minimum period of 90 days. The designated monitor is required to monitor the conduct and treatment of inmates or staff who reported an allegation of sexual abuse or sexual harassment and of inmates who suffered sexual abuse or sexual harassment for a minimum of 90 days. The monitor is required to determine if there are changes that may suggest possible retaliation by inmates or staff and to act promptly to remedy any such retaliation. The retaliation monitor is required to continue monitoring beyond the 90-day period in the event initial monitoring indicates a continuing need.

The Auditor interviewed the staff member responsible for monitoring retaliation who stated they are responsible for reviewing disciplinary charges and incident reports, or any other actions related to the inmate which may include documents maintained in an inmate's file and his/her electronic record. The staff member stated the monitoring period would be a minimum of 90 days and in the event the inmate cannot be protected at the facility, staff can and will recommend a transfer. The Auditor inquired as to what protocols are used to protect an inmate who is being retaliated against by a staff member. The Auditor was informed the retaliation monitor would discuss staff assignments with supervisors to ensure the staff member is not placed in an area where the inmate is housed. The retaliation would be reported through the Chain of command to ensure the staff member who is retaliating against an inmate is appropriately disciplined.

The PREA coordinator and classification supervisor under the direction of the Correctional Facility Administrator, have the authority to reassign inmates to other facilities and the facility can take other protective measures to ensure inmates were not retaliated against. In addition, the facility administrator has the authority to intervene in any way necessary to protect employees from retaliation if they report incidents of sexual abuse or harassment. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members.

Staff members interviewed affirmed that they are required to report any incident of retaliation and stated they are aware they could report such incidents anonymously. The facility has prepared checklists and logs that verify compliance with the necessary elements of the standard.

Conclusion: The Auditor reviewed the facility's policies and procedures, investigative reports, monitoring forms, interviewed staff and inmates. The Auditor determined the facility meets the requirements of this standard.

115.68	Post-allegation protective custody
	<p data-bbox="256 188 959 224">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 300">Auditor Discussion</p> <p data-bbox="256 340 1118 376">Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p data-bbox="256 412 687 448">SOD 01.0E Protective Custody</p> <p data-bbox="256 483 528 519">HRSV/HRSA Report</p> <p data-bbox="256 555 1018 591">AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p data-bbox="256 627 871 663">ORCC PO 06 A4, A5, B1 Restrictive Housing</p> <p data-bbox="256 698 831 734">PREA Allegation Tracking and Monitoring</p> <p data-bbox="256 770 1075 806">SOD 13.0E Reviews, Reassessments and Reclassifications</p> <p data-bbox="256 842 759 878">PREA In-Service Completion Report</p> <p data-bbox="256 913 552 949">Interviews with Staff</p> <p data-bbox="256 985 600 1021">Interviews with Inmates</p> <p data-bbox="256 1057 1474 1469">The ORCC policy is written in accordance with PREA standard 115.68 and requires that the use of segregated housing be subjected to the requirements of PREA standard 115.43. Interviews with staff state they would not place an inmate in segregated housing for reporting sexual abuse or assault unless he or she had requested, or exigent circumstances prevailed. Staff explained that other alternatives are considered, and segregation is utilized as last option. The Auditor observed several areas in the facility that sexual abuse victims could be housed to ensure they are protected from abusers without having to place the victim in segregated housing. ORCC does not have segregation housing therefore inmates must be transferred when under a discipline status.</p> <p data-bbox="256 1505 1481 1711">The ORCC has not had incidents that have required restrictive protective custody during the past 12 months and Auditor interviews with the supervisory staff as well as the Facility Administrator, PREA coordinator and classification supervisor, confirmed their knowledge of responsibilities to appropriately adhere to the elements of standard 115.43 (Protective Custody) when there is an allegation of abuse.</p> <p data-bbox="256 1747 1417 1953">During interviews with the classification supervisor and the PREA coordinator, the Auditor verified that there have been no instances of inmates being placed in restrictive housing because of sexual victimization or vulnerability. The Auditor reviewed classification and housing records that reveal no inmate was placed in protective custody during the previous 12 months.</p> <p data-bbox="256 1989 1474 2069">Conclusion: The Auditor concluded the facility has a policy that includes the elements of PREA standard 115.68 to ensure inmates receive privileges, programming,</p>

	<p>education, and work opportunities if placed in Protective Custody. The Auditor reviewed the facility's policies, procedures, classification records, housing records, made observations, and interviewed staff. The Auditor determined the facility meets the requirements of this standard.</p>
--	---

115.71	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Special Investigations</p> <p>Interviews with Staff</p> <p>Observations</p> <p>Investigative Files</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>Supervisor PREA Incident Checklist</p> <p>PREA Allegation Tracking and Monitoring</p> <p>Investigator Training Records</p> <p>30 Day Review</p> <p>The ORCC policy is written in accordance with PREA standard 115.71 and requires that the facility conduct administrative and criminal investigations of sexual abuse and harassment. The ORCC policy stipulates that they will respond to complaints promptly which may be received internally or externally by a third party. Administrative investigations include efforts to determine whether staff actions or failure to act, contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings. The Auditor reviewed investigative reports during the past twelve months, and they contained required information.</p> <p>ORCC staff stated that investigations at ORCC that appear to be criminal in nature,</p>

will be referred to the Arundel County Police Department investigators. The PREA coordinator is required to maintain written investigative reports for as long as the alleged inmate abuser is incarcerated or staff member is employed, plus an additional 5 years. The files are maintained by the PREA Manager in a secured location with limited access. Policy prohibits the termination of an investigation if an inmate is released, a staff member is terminated, or staff resigns.

ORCC investigators are required by policy to cooperate with outside investigators and maintain open lines of communication to remain informed of the progress of a sexual abuse investigation. According to interviews with the PREA coordinator, if an outside facility were to investigate a sexual abuse case, the departmental investigator serves as a liaison and would keep the Facility Administrator informed of the progress of the investigation. The Auditor reviewed training records of staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities. Training curricula and training certificates for the designated investigators were reviewed.

The Auditor interviewed the facility PREA Investigator who stated they review criminal histories on all inmates involved in an incident to include disciplinary history, incident reports, and classification actions. The investigator stated they also review video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination of the investigation. If at any point during the investigation they determine there could be potential criminal charge involved, the investigator would notify the PCM for guidance. The Investigator stated their investigation begins immediately after receiving an allegation notification and if an allegation is reported anonymously, the PREA coordinator and investigator both stated the investigation would be handled the same as any other investigation. They stated that they would continue the investigation even if an inmate is released or a staff member resigns while under investigation.

The Auditor reviewed investigative files which indicated the investigators conduct investigations in accordance with standard 115.71. The reports reflect that the investigators gathered evidence, interviewed witnesses, victims, perpetrators, and conducted the investigation immediately, thoroughly, and objectively. No State entity or Department of Justice component has investigated a sexual abuse or sexual harassment at ORCC during the review period.

Conclusion: The Auditor reviewed facility policy, procedures, investigative records, training records, made observations, interviewed staff and determined the facility meets the requirements of this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Special Investigations</p> <p>Interviews with Staff</p> <p>Observations</p> <p>Investigative Files</p> <p>Memos</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>Supervisor PREA Incident Checklist</p> <p>PREA Allegation Tracking and Monitoring</p> <p>Investigator Training Records</p> <p>The ORCC facility policy is following the requirements of PREA standard 115.72 and imposes no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Interviews by the Auditor with the PREA coordinator and investigator confirmed that the staff responsible for administrative adjudication of investigations are aware of the requirements of the evidentiary standard. They communicated what preponderance of evidence meant and how they arrived at the basis for a determination of an investigation case. A review of investigative files indicates that the investigations are being conducted in accordance with the standard and investigator training programs provide in-depth clarification for implementation of this standard. A review of investigative reports verified investigators are using preponderance of evidence to support their determination with the outcome and the Auditor was able to determine that investigators understand their responsibilities to be impartial.</p> <p>Conclusion: The Auditor was able to determine that facility investigators utilize this standard as the basis to determine whether to substantiate sexual abuse and sexual harassment allegations. The Auditor reviewed the facility's policy, procedures, investigative reports, interviewed staff and determined the facility meets the requirements of this standard.</p>
--	--

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

Materials, Interview, Policy and Other Evidence Reviewed:

ORCC Completed PAQ

Interviews with Staff

30 Day Review

Observations

Investigative Files

AD 06.06 PREA-Sexual Abuse and Sexual Harassment

Supervisor PREA Incident Checklist

PREA Allegation Tracking and Monitoring

Investigator Training Records

Inmate Notifications

PREA Coordinator interview

Investigator interview

PREA Orientation

Inmate Orientation Booklet

Grievance Log

The ORCC policy is written in accordance with PREA standard 115.73 and requires an inmate to be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The Auditor conducted interviews with the PREA coordinator, and the investigators and they verified the facility is responsible for the administrative and criminal investigations initiation.

The Auditor reviewed the investigative files for the reported allegations of sexual assault and harassment and determined notifications to the inmates at the conclusion of the investigation were conducted as required. The PCM and investigators acknowledged that inmates are informed of the determination at the conclusion of the investigation and document the notification. Notifications made to the inmate by the PREA compliance manager are provided on a facility letterhead and includes the date, inmate's name, inmate's number, and investigative finding. The notification is signed by the inmate, investigator, and the PREA compliance manager.

Conclusion: The Auditor concluded ORCC informs inmates of investigative determination at the conclusion of an investigation. The Auditor reviewed facility policies, procedures, notifications to inmates, and conducted interviews to determine the facility meets the requirements of this standard.

--	--

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Special Investigations</p> <p>Interviews with Staff</p> <p>Observations</p> <p>Investigative Files</p> <p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>PREA Allegation Tracking and Monitoring</p> <p>Staff Training Records</p> <p>AD 03.01 Conduct Standards</p> <p>AD 03.05 Disciplinary and Discipline Procedures</p> <p>The ORCC PREA and disciplinary policies were reviewed and are following the requirements of PREA standard 115.76. Staff are subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. The policy requires that staff found responsible for sexual abuse of an inmate shall be terminated from employment. Employees who are found to have violated jail policy related to sexual abuse and harassment, but not actually engaged in sexual abuse shall be disciplined in a manner proportionate with the nature and circumstances or the acts as the previous disciplinary history of the staff and comparable to offenses by other staff with similar disciplinary histories.</p> <p>ORCC administrative directives stipulate that termination is the presumptive disciplinary action for staff who engage in sexual abuse in compliance with the standard. The PCM and staff members sanctioning allegations, verified that violations of sexual abuse and sexual harassment policies, other than engaging in sexual abuse, will be disciplined commensurate with the nature and circumstances of the acts, discipline history, and comparable disciplinary actions. According to ORCC policy, the Facility Administrator is responsible in determining the sanctions for these violations.</p> <p>ORCC policy directives indicate that termination is the presumptive action for those employees that are found to have a substantiated case of sexual abuse against them. These cases will be referred for criminal prosecution and will be reported to any</p>

relevant licensing bodies. Additionally, disciplinary sanctions will take into consideration the staff member's disciplinary history, sanctions imposed for similar offenses by other staff, and the nature of the acts committed.

The Auditor interviewed the Facility Administrator regarding the facility's disciplinary policy. It was determined that if a staff member is terminated for violating the facility's sexual assault and harassment policy, and if the conduct is criminal in nature, it would be referred for criminal prosecution. The facility investigator and PCM verified that if an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, that the resignation does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature.

The facility would still refer the case for prosecution when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment.

The Auditor observed the facility's policy which included a provision to notify law enforcement agencies of criminal violations of sexual abuse. The policy also requires the PREA coordinator notify relevant licensing bodies. The Auditor discussed the requirement for the facility to notify law enforcement and relevant licensing bodies with the facility's executive staff who are clear on the requirement following a criminal act of sexual abuse.

The Auditor determined the facility has appropriate policies and practices in place, which ensure staff are disciplined for violating the facility's sexual abuse and sexual harassment policies. The facility makes termination of the staff, the presumptive discipline measure for engaging in acts of sexual violence and reports violations of sexual abuse to the local law enforcement facility and relevant licensing bodies.

Conclusion: Interviews with the Facility Administrator, Investigator, and the PREA Compliance manager support that allegation against staff for sexual abuse, sexual harassment, retaliation, or neglect, are investigated and disciplinary action sanctioned. The Auditor determined the facility meets compliance with the standard.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials, Interviews, Policies and Other Evidence Reviewed:
	Special Investigations
	Interviews with Staff
	Observations
	Investigative Files

	<p>AD 06.06 PREA-Sexual Abuse and Sexual Harassment</p> <p>PREA Allegation Tracking and Monitoring</p> <p>Contractor Training Records</p> <p>AD 03.01 Conduct Standards</p> <p>AD 03.05 Disciplinary and Discipline Procedures</p> <p>Interviews Contractors and Volunteers</p> <p>The ORCC PREA and disciplinary policies were reviewed and follow the requirements of PREA standard 115.76. Policy states that contractors and volunteers who violate sexual abuse or sexual harassment policies are prohibited from having contact with inmates and will have their security clearance at ORCC revoked and governing licensing agencies would be notified. Contract staff who violate this policy would most likely be terminated by the contract employer and if the conduct of the contractor is criminal in nature, the investigation will be referred to facility investigators and local law enforcement agencies for possible prosecution. The facility's management team is aware of the requirement to notify relevant licensing bodies following a contractor or volunteer's participation in a criminal act of sexual abuse. There have not been any instances where volunteers or contractors have engaged in sexual abuse or harassment in the past 12 months at ORCC which required referral.</p> <p>The Auditor interviewed contract staff who verified that they are aware of a violation of the PREA policy, and an allegation of sufficient seriousness could warrant termination from the facility and possible prosecution in accordance with the law. The contract staff were aware that the facility has a Zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to local law enforcement for prosecution. The ORCC maintains appropriate policies to ensure contractors and volunteers at ORCC are removed from inmate contact after committing an act of sexual abuse or sexual harassment if deemed necessary.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, training documents, investigative record, interviewed staff and contractors, to determine the facility meets the requirements of this standard.</p>
--	---

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials, Interviews, Policies and Other Evidence Reviewed: MOU's

SOD 03.0A Rules and Penalties

Interviews with Staff

Observations

Investigative Files

AD 06.06 PREA-Sexual Abuse and Sexual Harassment

PREA Allegation Tracking and Monitoring

Contractor Training Records

AD 03.01 Conduct Standards

AD 03.05 Disciplinary and Discipline Procedures

Interviews

The ORCC policy states that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy states that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred even if the investigation does not establish sufficient evidence to substantiate the allegation. ORCC prohibits sexual activity between inmates housed in the facility and inmates found to have participated in sexual activity are disciplined by the facility and if the sexual activity is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse.

ORCC policy states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. According to ORCC completed PAQ, there have been no cases of inmate-on-inmate sexual abuse.

ORCC policy states that disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories. ORCC policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions. The ORCC does not always have mental health staff available but has mental health staff on call for emergency needs and can transfer inmates if they need specialized mental health treatment. Any decision to offer counseling or therapy to inmates and the initiation of any counseling or therapy for individuals who have committed sexual offenses, is determined at the discretion of the facility mental health staff in conjunction with development of a treatment plan for the inmate.

ORCC policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that the conduct occurred. There were no occasions in the past 12 months, where inmates were disciplined for filing a report. The Auditor reviewed investigative files, classification files, inmate records, and interviewed staff in reference to evidence that may suggest an inmate received a disciplinary charge for

	<p>making an allegation of sexual abuse or sexual harassment.</p> <p>Conclusion: The Auditor determined the facility maintains policies that follow PREA standard 115.78 protocol. Facility personnel ensure the policy is applied when choosing whether to discipline an inmate for reporting or participating in an act of sexual abuse. The Auditor determined the facility is compliant with this standard.</p>
--	---

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>ORCC OD 17.01 Mental Health Services</p> <p>Inmate Records</p> <p>HRSA/HRSV Logs</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>Wellpath PREA Training</p> <p>ORCC PREA Screening Form</p> <p>PREA Allegation Tracking and Monitoring</p> <p>The ORCC policy is consistent with the requirements of PREA standard 115.81. The policy requires staff offer a follow-up meeting with medical or mental health staff within 14 days of arrival at the facility for an inmate that reports sexual victimization either in an institutional setting or in the community. It is ORCC policy to identify, monitor, and counsel inmates who are at risk of sexual victimization, as well as those who have a history of sexually assaultive behavior.</p> <p>The facility's policy stipulates information related to sexual victimization and abusiveness that occurred in an institutional setting, be strictly limited to medical, mental health, and other staff only as necessary. The protected information will be used to create treatment plans, security and management decisions, housing placement, bed assignments, work assignments, and program assignments, or as</p>

	<p>otherwise required by Federal, State, or local law. Medical and mental health practitioners at ORCC are required to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.</p> <p>Review of random inmate files verified that the screenings were being conducted in accordance with the standards and the policy. The Auditor reviewed files of inmates who were identified as needing follow up care. The inmates were offered and received follow-up care within 14-day period as stated by the standards. Medical staff interviews confirm that if an inmate answers (yes) on the screening questionnaire to previous victimization, it automatically triggers an alert for a referral and the inmate is offered a follow-up meeting to be scheduled. This information is recorded in a medical electronic file and each medical staff member has an individual personal access login and password.</p> <p>Conclusion: The Auditor reviewed the facility’s policies, procedures, inmate medical and classification records, and conducted interviews with medical staff. After review by the Auditor, it is determined the facility meets the requirements of this standard.</p>
--	--

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>ORCC OD 17.01 Mental Health Services</p> <p>Inmate Records</p> <p>HRSA/HRSV Logs</p> <p>Interviews with Staff</p> <p>Interviews with Inmates</p> <p>YWCA MOU</p> <p>Inmate Handbook</p> <p>Medical Record</p> <p>Investigative Record</p>

	<p>Medical Training Records</p> <p>Interview with SANE</p> <p>Interview with Victim Advocate</p> <p>The ORCC policy is written in compliance with PREA 115.82 standard that states all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Interviews with medical staff, as well as the PREA coordinator, confirm that victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services through facility medical staff and outside vendor resources. Wellpath contract medical staff provide coverage at the institution, MOU with Baltimore Washington Hospital, and MOU with YWCA as the crisis center.</p> <p>While there have been no documented incidents of sexual abuse requiring emergency medical or mental health services during the review period, the staff are aware of their responsibilities regarding protection of the victim and evidence in the case of a report of sexual assault. In addition, the contracted medical and mental health staff are available 24 hours per day in the case of emergency or crisis intervention services. For services required outside the scope of their experience, the victim can be treated at the local hospital emergency department.</p> <p>ORCC policy states that inmate victims of sexual abuse will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. There have been no incidents of sexual assault at the ORCC in the last 12 months requiring these services. ORCC policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANE) without a financial cost to the victim.</p> <p>The Auditor conducted a telephone interview with a victim advocate from the YWCA and discussed the responsibility between the organization and the facility. The advocate informed the Auditor that the YWCA provides crisis intervention services to inmate victims at ORCC at no charge. The advocate stated when an inmate requests such services the advocate meets the SANE at the medical facility and provides support to the victim during the forensic examination and if needed, the advocate will continue to provide crisis intervention services beyond the forensic examination.</p> <p>Conclusion: The Auditor reviewed the facility's policies, procedures, medical records, investigative records, Inmate handbook and interviewed staff, SANE, victim advocate, and inmates. The Auditor determined the facility meets the requirements of this standard.</p>
--	--

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials, Interviews, Policies and Other Evidence Reviewed:

AD 06.06 PREA Sexual Abuse and Sexual Harassment

ORCC OD 17.01 Mental Health Services

Inmate Records

HRSA/HRSV Logs

Interviews with Staff

Interviews with Inmates

YWCA MOU

Medical Record

Investigative Record

Training Records

Wellpath Operation PREA Directives

Interview with SANE

The ORCC policy is written in compliance with PREA standard 115.83 and states that the facility will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow-up services, treatment plans, and referrals for continued care following their transfer or release.

Interviews with medical and mental health staff confirm that these services would be available to inmates who have been victims of sexual abuse and are consistent with the community level of care. There has been no instance of sexual abuse during the review period therefore the Auditor was unable to review any related documentation regarding follow-up and ongoing medical and mental health care.

ORCC policy states that inmate victims of sexual abuse receive timely unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of these actions are determined by medical and mental health practitioner's judgment. Policy requires treatment services to be consistent with the community level of care and provided without financial costs regardless of whether

the victim names the aggressor or cooperates with any investigation arising out of the incident. If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual violence is made, first responders will take preliminary steps to protect the victim and shall immediately notify the shift supervisor. Inmates are offered mental health and medical services, forensic and sexual assault exams, to be conducted by a qualified professional.

The Auditor interviewed the mental health practitioner concerning what services are offered to victims of sexual abuse and was informed that counseling sessions, referrals if appropriate, and follow-up services are provided at no cost to the inmate. The mental health practitioner also creates treatment plans and follow-up treatment plans. The Auditor was provided documentation that verified services offered at ORCC are consistent with community level services and verified the services through observations and interviews. The mental health practitioner is clear on their requirement to conduct the evaluation within 60 days of learning of the abuse and stated the assessment would be conducted much sooner.

ORCC policy requires that female inmate victims of sexual abuse which occurs while in the facility, will be offered pregnancy tests. Inmate victims who become pregnant while in the facility will receive comprehensive information about all lawful pregnancy-related medical services. Inmate victims of sexual abuse while in the Jail will be offered tests for sexually transmitted infections as medically appropriate.

ORCC policy states that all treatment services for sexual abuse will be 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. Interviews with medical staff confirm that these services would be provided to the inmate at no cost and there have not been any incidents of sexual assault at ORCC in the last 12 months requiring these services.

Staff interviews confirmed the presence of policies and procedures consistent with PREA standard 115.83 and confirmed the medical and mental health are knowledgeable of the policy and their requirement. The Auditor conducted interviews with medical and mental health practitioners who stated they do not stipulate a minimum or maximum number of appointments with victims of sexual abuse. Mental health practitioners stated they meet with victims and abusers if the victim or abuser request a meeting or if it is deemed medically necessary and treatment and evaluations occur as needed or until treatment is no longer needed.

Conclusion: The Auditor reviewed the facility's policies, procedures, medical records, investigative records, Inmate handbook, interviewed staff, SANE, victim advocate and inmates. The Auditor determined the facility meets the requirements of this standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Materials, Interviews, Policies and Other Evidence Reviewed:

PREA Allegation Tracking and Monitoring

Special Investigations

Interviews with Staff

Investigative Files

AD 06.06 PREA-Sexual Abuse and Sexual Harassment

Supervisor PREA Incident Checklist

30 Day Review form

ORCC has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. The ORCC policy is written in compliance with PREA standard 115.86 states that a sexual abuse incident review will be conducted within 30 days after the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The review team will consist of upper-level management officials, supervisors, investigators, and medical/mental health personnel. Any allegation of sexual abuse that appeared criminal in nature would be referred to the Arundale County Police department.

ORCC policy states that the review team will consider a need to change policy or practice to prevent, detect, or respond to sexual abuse and the facility has appointed a team that conducts incident reviews at the conclusion of sexual assault investigations as stipulated by the standard and a written report of the findings is prepared and maintained by the PREA coordinator. This was confirmed during interviews with the Facility Administrator and PREA coordinator. The PCM indicated that the reviews ordinarily take place within 30 days of the conclusion of the investigation but can take place sooner. An interview with a member of the incident review team stated that if there was an incident that required a review, all factors would be considered and a report of the findings including recommendations for improvement would be completed and submitted to the Correctional Facility Administrator for review. The PREA coordinator stated any recommendations would be implemented or the reasons for not doing so would be documented.

The Auditor determined the facility is conducting incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation and the incident review team documents the findings of each incident review.

Conclusion: The Auditor reviewed the facility's policies, procedures, sexual abuse incident review report, training records, conducted interviews with staff. The Auditor determined the facility meets the requirements of this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>SSV Summery Form 2022</p> <p>DDF Facility Website</p> <p>Interviews with Staff</p> <p>PREA Allegation Tracking and Monitoring</p> <p>The ORCC policy is consistent with the requirements of PREA standard 115.87 and states that the facility will annually aggregate uniformed data for all allegations of sexual abuse which is necessary to answer all questions from the most recent version of the "Survey of Sexual Violence" conducted by the Department of Justice. The facility will complete an annual report based upon the data and post it on the facility website. The Auditor reviewed the annual report available on the facility website, including aggregated sexual abuse data for calendar year 2023.</p> <p>An interview with the PREA coordinator confirms the facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data from the previous calendar year is supplied to the Department of Justice no later than June 30th of each year, if requested.</p> <p>The facility is collecting and aggregating sexual abuse data on an annual basis as required by the standard and the report uses a standardized set of definitions, which are available on the facility website and in the ORCC policy. The ORCC does not contract with a private facility for the confinement of its inmates.</p> <p>Conclusion: The Auditor observed evidence that the facility is collecting and aggregating sexual abuse data annually. The reported data is derived from a standardized set of definitions. The Auditor reviewed the facility's policies, procedures, website, annual report, and interviewed staff to determine the facility meets the requirements of this standard.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Materials, Interviews, Policies and Other Evidence Reviewed:

	<p>Facility Annual Report</p> <p>Facility Website</p> <p>Interviews with Staff</p> <p>The ORCC policy mandates that the facility collects and aggregates data to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The facility annual report will include a comparison of the current year's data and corrective actions with those from prior years and must provide an assessment of the progress in addressing sexual abuse. The report must be approved by the PREA manager and Correctional Facility Administrator before being made readily available to the public through the facility public website. Specific material may be redacted from the reports when publication of the material would present a clear and specific threat to the safety and security of a facility or staff. If material is redacted, the report must indicate the nature of the redacted material.</p> <p>The Auditor reviewed the ORCC website and verified the facility maintains reports that include findings for their facility. The public can access the facility reports through the dropdown tab and clicking on the "Prison Rape Elimination Act" link.</p> <p>The Auditor interviewed the PREA compliance manager in reference to the annual reporting process and verified that the information for the annual report is derived from investigative reports, incident reviews and other relevant documents included in investigative records from the facility. Corrective actions are implemented at the facility when recommended and any corrective actions would be documented in the facility annual report.</p> <p>Conclusion: The Auditor reviewed the website and observed evidence that the facility is collecting and aggregating sexual abuse data. The Auditor reviewed the facility's policies, procedures, website, annual report, and interviewed staff to determine the facility meets the requirements of this standard.</p>
--	--

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>ORCC Facility Website</p> <p>Interviews with Staff</p> <p>AD 06.06 PREA Sexual Abuse and Sexual Harassment</p> <p>The facility policy requires sexual abuse data to be securely retained. Policy states all</p>

	<p>aggregated sexual abuse data is readily available to the public annually on the facility website and requires sexual abuse data is maintained for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise. The data is maintained in the facility's secure computer servers and the facility is required to remove all personal identifiers before making sexual abuse data public on its website.</p> <p>Information for the facility's annual report is maintained by the PREA compliance manager and PREA coordinator. The information for the annual report is obtained from investigative files and incident review reports. The Auditor conducted an interview with the facility's PREA compliance manager and PREA coordinator who advised the information is obtained through investigative reports and files. The Auditor was informed that collected data is maintained electronically in a secure computer database and in written form in a limited access secured area. All electronically maintained data has limited restrictive access.</p> <p>The Auditor reviewed the facility's website which included annual sexual abuse data collection in an annual report published on the facility website and found no personal identifiers were included.</p> <p>Conclusion: The Auditor determined that ORCC meets the requirements of this standard.</p>
--	---

115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Facility Website</p> <p>Annual Reports</p> <p>Observations</p> <p>Staff Interviews</p> <p>The Auditor received confirmation of PREA Notice postings via email of photos dated six weeks in advance of the on-site visit. The notices were placed in the inmate housing units, program areas, and work assignment areas. During the Auditor interviews, inmates confirmed their observation of the PREA notice postings throughout the institution which verified the procedure to submit confidential correspondence to the Auditor. During interviews with mailroom staff, it was documented that inmates are allowed to forward confidential correspondence to the Auditor in the same manner as mail addressed to legal counsel.</p>

	<p>This is the initial audit for Ordnance Road Correctional Center and the Auditor was provided documentation prior to the on-site audit for review to support a determination of compliance with PREA standards. During the on-site visit, pre-audit, and post audit phases, the Auditor received and reviewed sufficient document sampling based on the size of the facility. The documents included PREA investigative files, staff/ inmate training records, inmate risk screenings, review of housing unit logbooks, program information, and other pertinent documentation.</p> <p>The Auditor interviewed the required number of staff and inmates based on the PRC recommendation of facility population size and demographics. Staff and inmates interviewed were knowledgeable regarding PREA requirements and protocols. The Auditor was given access to all documentation requested and was afforded the opportunity to tour and visit all areas at ORCC. Interviews with supervisory staff, nonsupervisory staff, management staff, and inmates, were conducted on-site in an area that ensured privacy.</p> <p>Conclusion: The Auditor determined that ORCC meets the requirements of this standard.</p>
--	--

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Materials, Interviews, Policies and Other Evidence Reviewed:</p> <p>Facility Website</p> <p>This is Ordnance Road Correctional Center initial audit and was conducted on April 11th, 2024. The report is publicly available via the DDF website: https://www.aacounty.org/</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.)	yes
	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	yes

	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.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

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

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

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

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

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

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

	screening instrument?	
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

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

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
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.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

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

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

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

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