

# PREA Facility Audit Report: Final

**Name of Facility:** Elmwood Men's Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 07/20/2019

**Date Final Report Submitted:** 10/01/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" 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 checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Eric Woodford	<b>Date of Signature:</b> 10/01/2019

AUDITOR INFORMATION	
<b>Auditor name:</b>	Woodford, Eric
<b>Address:</b>	
<b>Email:</b>	eiw@comcast.net
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	2019-06-03
<b>End Date of On-Site Audit:</b>	2019-06-06

FACILITY INFORMATION	
<b>Facility name:</b>	Elmwood Men's Facility
<b>Facility physical address:</b>	701 S. Able Street , Milpitas, California - 95035
<b>Facility Phone</b>	
<b>Facility mailing address:</b>	

Primary Contact	
<b>Name:</b>	Erica Bravo
<b>Email Address:</b>	erica.bravo@shf.sccgov.org
<b>Telephone Number:</b>	4088083692

Warden/Jail Administrator/Sheriff/Director	
<b>Name:</b>	Amy Le
<b>Email Address:</b>	amy.le@shf.sccgov.org
<b>Telephone Number:</b>	(408) 957-5303

Facility PREA Compliance Manager	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	
<b>Name:</b>	Fernando Gonzalez
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<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Matthew Gerrior
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<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	0
<b>Current population of facility:</b>	2177
<b>Average daily population for the past 12 months:</b>	
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	
<b>Age range of population:</b>	
<b>Facility security levels/inmate custody levels:</b>	Minimum - Low Medium Security
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	300
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	

AGENCY INFORMATION	
<b>Name of agency:</b>	Santa Clara County Custody Bureau
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	180 W.Hedding, San Jose, California - 95110
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

Agency Chief Executive Officer Information:	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Erica Bravo	<b>Email Address:</b>	erica.bravo@shf.sccgov.org

## AUDIT FINDINGS

### **Narrative:**

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

### Audit Narrative

A Prison Rape Elimination Act (PREA) Audit was conducted at the Elmwood Men's Detention Facility located in Milpitas California during the week of July 8, 2019 by Eric Woodford and Rick Winistorfer, both a US Department of Justice (USDOJ) certified PREA Auditors. This was the third PREA audit for the Santa Clara County Jail Sheriff's Department. The very first PREA audit was conducted in 2015.

On 1/30/17 the Santa Clara County Sheriff's Office and auditor signed a PREA audit agreement to conduct PREA audits for each of its two correctional facilities. Term of the contract is from 7/1/17 to 6/30/2020

On 2/8/19 auditor provided the agency PREA Coordinator with pre-audit documentation such as the pre-audit questionnaire, audit process map, audit documentation checklist and audit tour instructions. The auditor submitted an additional document request on 4/1/19 for staff, contractor, volunteer and inmate listing in order to conduct a random selection for document review.

On 4/11/19 auditor provided agency with Notice of Auditor poster language in both English and Spanish. Instructions on posting, date of posting deadline and proof of posting verification to be provided to the auditor accompanied the Notice of Auditor posting language. Agency provided verification of posting by the deadline which was six weeks prior to the onsite audit. The Notices of Auditor were posted in all inmate living areas, hallways where inmates and staff travel throughout the facility, doorways that lead to each part of the facility for both staff and inmates, facility lobby area, visiting, kitchen, break rooms, medical and program rooms.

On 5/2/19 auditor requested inmate, staff, contractor and volunteer lists to select for document review. Agency provided requested lists for document review on 5/5/19 Auditor made selections based upon hire date, gender, job positions and shifts. Auditor presented agency with random selections for document review on 5/14/19 Auditor also requested investigation records, grievances, training records and personnel records pulled from the selections made by auditor. The agency provided the documents by 5/31/19 for auditor to complete the document review worksheets for verification of compliance.

During the course of the Field Training Audit, the team reviewed the number of documents to assist in the triangulation of data and support the findings in the individual provisions. These documents included:

- Complete inmate roster\*
- Youthful inmates/detainees
- Inmates with disabilities
- Inmates who are LEP
- LGBTI Inmates
- Inmates in segregated housing
- Residents in isolation
- Inmates/residents who reported sexual abuse

- Inmates/residents who reported sexual victimization during risk screening
- Complete staff roster
- Specialized staff
- All contractors who have contact with inmates
- All volunteers who have contact with inmates
- All grievances made in the 12 months preceding the audit
- All incident reports from the 12 months preceding the audit
- Allegations of sexual abuse and sexual harassment reported for investigation in the 12 months preceding the audit.
- All hotline calls made during the 12 months preceding the audit
- 21 Staff Files were reviewed
- 25 Contractors & Volunteer files were reviewed
- 24 Inmate screening files were reviewed.

The facility completed the Pre-Audit Questionnaire (PAQ) on 5/2/19 Facility staff provided the auditor with a number of documents including schematics, policies, logs and other resources to the PAQ. A conference call was conducted with facility administration on 5/5/19 to make introductions, establish the PREA Coordinator to be the point of contact (POC), discuss processes and expectations with the auditor. Mail process of correspondence between inmate and auditor was also discussed.

On 5/29/19 auditor contacted Just Detention International (JDI) and spoke with the Operations Director who indicated there has been no record of calls or correspondence regarding allegations of sexual abuse from the Solano County Jail Claybank Detention Facility over the past 12 months.

The PAQ noted that no internal or external audits except for the American Correctional Association accreditations for the Elmwood Mens facility. During the course of the audit the auditor exchanged numerous emails and phone conversations with the PREA Coordinator relative to document requests. The agency complied with all requests.

Auditor received one correspondence letter from a CDF inmate. This inmate was included in the interview list for the onsite audit, however, he was released prior to the onsite audit. One week prior to the onsite audit, auditor requested agency complete the Specialized listing of staff and provide a listing of staff, contractors and volunteers which provides for their duty shifts and titles or designations for onsite interviews. Listing for inmates to identify their housing units, gender, and earliest possible release date for formal interviews. Agency provided the requested lists three days later and auditor made random selections of staff based upon shifts and titles. The selections equaled 6 staff members per shift. The contractors and volunteers were selected at random based upon their job titles. Based upon their availability, Auditor had to select two volunteers while on site as the selected volunteers were unavailable. Auditor interviewed 4 contractors from the original selections. Inmates were selected based upon gender and housing unit, where the female inmates were selected as there were very few and housed only in the Medical Unit. Auditor selected one inmate per page to a total of 29 random inmates. Auditor provided agency with a completed interview listing on first day of the onsite audit.

The on-site review began on 7/8/18 with an entry briefing. Attendees during the pre-audit included: The Facility Commander, PREA Coordinator, Facility PREA Compliance Manager both Administrative Sergeants, the agency LGBTQ Deputy and the PREA Manager. During the briefing, conduct of the audit was discussed including the audit timeline during the week. Auditor opened the floor for questions and provided responses for any questions asked. Following the in briefing, the physical plant review was conducted by the PREA Manager, PREA Compliance Manager and the LGBTQ Deputy. Santa Clara County Jail consists of 30 housing sections, 8 multiple occupancy housing units, 41 open bay/dorm housing units, 0 segregation cells, Administration, Maintenance, medical clinic and others as noted in the following site review summary: The site review was conducted as follows:

## Main Housing Units

### Housing Unit M1 Female Minimum/Medium – 3 PODs

PREA posters and notice of auditor posters located throughout in each housing unit accessible to both inmates and staff. There are 3 cameras with 2 mirrors. Auditor observed cross-gender announcement made when male staff entered the housing unit. Auditor conducted an informal discussion with staff regarding the grievance lock box with grievance forms for anonymous retrieval and submission located in each housing unit. Staff indicates that supervisors open grievance boxes at least once per shift. An independent unit reviews the grievances and forwards the grievance to the appropriate area for response.

All 3 housing units have 3 phones in the day rooms for inmate use. Staff supervision ratio is 5 staff to 56 inmates per wing. Single showers for inmates are PREA compliant with no cross-gender viewing. Toilets are located in each housing cell with no cross-gender viewing available.

Blind-spot observed in the officer core area as there are no cameras in the interview rooms and ancillary areas. There is 1 camera in the kitchen area only.

### Housing Unit M2 Male Medium/PC – A/B/C/D PODs

PREA and notice of auditor posters located in hallways entering the housing units. The cells have perforated frosting and staff can view inmate during toileting. Informal discussion with staff indicate a work-order has been initiated to replace frosting in both M2 and M3 housing.

There are 7 phones in each housing unit. Grievance lock boxes are available in each dorm, checked each shift at a minimum by the shift supervisor. Grievance boxes include grievance forms for anonymous retrieval and submission by inmates. Minimum staffing ratio of staff to inmate is 2-68. There are 2 showers per housing unit and toilets are in each cell.

### Housing Unit M3 Male Medium/PD –A/B/C/D – same architecture as M2

PREA and notice of auditor posters located in hallways entering the housing units. The cells have perforated frosting and staff can view inmate during toileting. Informal discussion with staff indicate a work-order has been initiated to replace frosting in both M2 and M3 housing.

There are 7 phones in each housing unit. Grievance lock boxes are available in each dorm, checked each shift at a minimum by the shift supervisor. Grievance boxes include grievance forms for anonymous retrieval and submission by inmates. Minimum staffing ratio of staff to inmate is 2-68. There are 2 showers per housing unit and toilets are in each cell.

### Buildings M4 & M5 Male General Population – A/B/C/D PODs

PREA posters and notice of auditor posters located throughout in each housing units accessible to both inmates and staff. There is opposite sex viewing in 4 holding cells during toileting through the camera system. Each holding cell has a camera. There are 3 cameras and 5 mirrors. An announcement was made when cross-gender staff entered the housing unit “female on deck”.

There are 8 phones in the housing units. Grievance boxes in each housing unit include grievance forms for anonymous retrieval and submission by inmates. Supervision staff to inmate ratio is 1-96. Only 48 inmates are out of cells at a time. There are PREA compliant showers with doors for privacy (3 downstairs & 2 upstairs. 2 multipurpose rooms with cameras in each, no bathroom.

### Housing Unit M8 East & West PODs- Male Medium, General Population, Special Management.

PREA posters and notice of auditor posters located throughout in each housing unit accessible to both

inmates and staff. There is opposite gender viewing during toileting in all 8 transport holding cells. Each cell pending new frosting to dissuade cross-gender viewing. There are 3 cameras and 5 mirrors in the control area of each housing unit. 4 holding cells and each has a camera with no cross-gender viewing through the camera system. There is no contact visiting available. Grievance system is the same as buildings M4 & M5. Ratio staff to inmate each shift are 3 deputies and 3 Mental Service Deputies. Buildings have 1 exercise yard each with 1 camera per yard. Housing unit showers are PREA compliant and bathrooms located in each POD.

M8 visiting room has 16 individual visiting booths. PREA and third-party posters are available in the entry way to the booths. 2 cameras and 2 mirrors supplement deputy supervision during visiting.

Noted area of concern: In the Transportation holding area, a total of eight (8) holding cells will require adjustment of the privacy screens. Current privacy screens allow for cross gender viewing during utilization of the toilet within the holding cell, application of new/additional frosting required.

#### Laundry

No hidden areas with 7 cameras for additional supervision. Staff to inmate ratio is 2 civilian staff – 18/20 inmates.

#### Receiving and Discharge (Intake Processing)

Inmates are transported from Santa Clara County Main Jail to the Elmwood facility following intake. The Elmwood intake processing area has two sides, one for male inmates and another for female inmates. The control area is between the 2 strip search areas, so there is no mingling of genders. Each side has a strip-search area for each gender. 2 staff conduct strip search – 1 conducts the strip search while the other observes the staff member out of view from the inmate so there is no cross-gender viewing. Only male staff strip-searches male inmates and visa-versa for female inmates. Intake processing uses magnetic strips on the holding cells for inmate privacy during toileting. There are 8 cameras in the Processing unit, none in the strip-search cells, one in each hallway leading to the male and female strip search areas. Televisions mounted on the walls in the holding area for each gender awaiting processing and housing. Cameras play the PREA video, in both English and Spanish, on a continuous loop.

#### Food Service/Kitchen

The kitchen is a 24-hour operation. There are no inmate dining rooms, but there is a staff dining room serviced by civilian staff. The kitchen has 8 coolers, 4 freezers and 2 dry-goods storage areas. All are locked unless food retrieval is necessary. Staff do not enter the cooler, freezer and dry goods area when inmates are working. Staff sends inmates to retrieve the goods and stands outside the area in camera view. The garbage and scullery area have camera coverage and there is a lock-box for tools. There are 32 cameras and 3 mirrors throughout the kitchen. Each cooler, freezer, and dry storage area contain at least one (1) camera, in most instances two (2) cameras have been placed, even the garbage/cleaning/dishwashing area has direct camera oversight. The kitchen also contains an inmate breakroom, outside behind the kitchen, with one (1) camera for coverage. Inmates are locked into this area, with direct staff supervision during their breaks.

Supervision is 1 to 2 badge staff with 12 civilian staff. Depending on the number of inmates on shift, supervision will either be one (1) or two (2) Deputies, ten – twelve (10–12) free staff (cooks, etc.), and anywhere between to sixty (60) – seventy (70) inmates. Inmate workers in the AM 9-60 and 20-30 in PM. No isolated areas observed. There is 1 camera viewing the garbage and dock area. 1 deputy and 1 camera, views the inmate bathroom and break room.

#### Health Services

As you enter health services, there are a number of holding cells where cross-gender viewing is available

from the entry hallway. Magnetic strips used in intake processing are recommended to dissuade cross-gender viewing. There is a television in the reception area that plays the PREA video. A reception deputy is posted at the front desk. Exam rooms are x-ray, dental, Doctor exam room. There is 1 treatment room. There are 3 cameras in Health Services with no infirmary and no suicide watch rooms. Medical records are kept in a room off the main hallway.

#### Industries Area

On day of the tour, there were no inmates in the industries area. The Industries area contains 2 staff bathrooms and 1 inmate bathroom. Tool area is in the machine shop. Tools are counted when provided to inmates and counted at the end of the shift. Tools are locked when not utilized and are accounted for by supervisory staff. There are 20 cameras throughout the Industries Area. The upholstery, wood, welding, auto body and laser room shops have cameras in each of these shops. Cameras are reviewed by shop managers on the site in the Industries shop.

A warehouse is available to staff only, with 2 cameras for surveillance. No inmates are allowed in the warehouse. Should inmates be working in the Industries shop to clean, they are supervise at all times, with an escort. 2 cameras are located in the warehouse.

Noted area of concern: Many of the cameras and mirrors had excessive dust build up on them, especially in the welding/wood/metal shops. Surveillance equipment needs to be “dusted” regularly to ensure clear viewing.

#### Clean Clothing Shop

5 cameras in the shop. Ratio of staff to inmate is 1 CSA to 20 Inmates. Hourly blind spot checks are conducted by custody staff and documented in the Welfare Check Log.

#### Warehouse

Ratio of staff to inmates is 5 – 2. There are 15 cameras throughout the Warehouse with 3 additional cameras on the loading dock.

#### Mailroom

2 custody staff in AM and 2 custody staff in PM work in the Mailroom and are supervised by 2 inmates each shift to observe the mail processing as mandated by court order. The inmates do not process or handle the mail. The AM shift reviews the incoming mail, processes it, bags it up in locked bags for each housing unit. The inmate observers deliver the locked bags to the appropriate housing units. During the PM shift, the inmate observers deliver the locked bags of outgoing mail to the mailroom and observes the outgoing mail processing.

#### Minimum Compound – Male

Entrance area to Minimum compound is staffed by four (4) deputies, with one controlling the door access in to and out of the compound area, for the purposes of attending classes and/or working in various parts of the facility. Inmates are required to provide ID and purpose when exiting from the compound area. For those inmates entering into the compound, a “modified” search is conducted when each inmate stands on a line in front of the desk, and is required to lift up their shirt to expose the upper body area, and then places their thumbs into the elastic waistband of both their jail pants/boxers, pulls out slightly, and runs their fingers around the waist in a back and forth manner, while not exposing their genitalia.

The Minimum Compound is comprised of numerous buildings, that branch off of a single covered

walkway. The “barracks” are on the right as you walk through the compound, each barracks is a two (2) story building, with large dormitories located on each floor. Located in the center of the compound, to the left of the walkway is the Chapel, which also serves as a “central” point for staff to observe inmate activities, when not walking through the barracks.

There are numerous cameras located throughout the compound, both inside and outside of the buildings. Along the walkway are cameras approximately every 50’ – 75’. Camera placements are noted within each of the barracks reviewed. This auditor also visited the camera monitoring room, which is staffed by two (2) deputies, and verified that there are no camera blind spots on each building within the Minimum Compound, both inside and outside of each building, with the exception of each of the bathroom/shower areas within each of the housing/barracks. Dayrooms are either located in the middle or end of each of the barracks, with sufficient camera coverage.

Along the covered walkway are a bank of approximately 10 – 15 phones. PREA posters have been staggered throughout the various barracks; however, staff advised that the inmates take them down. However, it should be noted that painted along the beams above the walkway/phones is a PREA message, along with a contact number for inmates to report PREA related matters.

Each of the Barracks contained an open dormitory style housing arrangement, bunk bed style with a separate area for showers and toilet facilities. Individual shower and toilets are provided within each of the following housing areas.

- Special Housing Unit: Three (3) cameras in unit, full coverage of main living area, privacy provided with individual toilet/shower area for one (1) inmate.
- Barracks 1: Full camera coverage; two (2) cameras Front/Back, one (1) camera in middle, full camera coverage in back and side yard areas. Bathroom has full screens for showers, toilet facilities have individual toilet bays.
- Barracks 2: Full camera coverage; two (2) cameras Front/Back, one (1) camera in middle, full camera coverage in back and side yard areas. Bathroom has full screens for showers, toilet facilities have individual toilet bays.
- Barracks 3: Full camera coverage; two (2) cameras Front/Back, one (1) camera in middle, full camera coverage in back and side yard areas. Showers & toilets located behind concrete wall, open bank of showers & toilets, no clear view from housing area outside of restroom.
- Barracks 6: Full camera coverage; two (2) cameras in middle, full camera coverage in back and side yard areas. Bathroom has full screens for showers, toilet facilities have individual toilet bays.
- Barracks 7: Full camera coverage; two (2) cameras in middle, two (2) cameras in stairwell, full camera coverage in back and side yard areas. Bathroom have barriers in place, toilet facilities have individual toilet bays.
- Barracks 10: Full camera coverage; two (2) cameras in middle, side camera coverage, one (1) camera coverage in entry. Bathroom has full screens for showers, toilet facilities have individual toilet bays.
- Barracks 13: Full camera coverage; two (2) cameras in middle, four (4) cameras in backside area, including full camera coverage in side yard areas. Bathroom has full screens for showers, toilet facilities have individual toilet bays.
- Chapel Area: Two (2) cameras provide full coverage inside Chapel area. Back Storage room has camera placement for view of room.
- Visiting Area: Strip search area has individual hospital privacy screens, utilized when inmates are strip-searched exiting from visiting area. Female staff are not present during search, or near room at time of search. Located within the visiting area are three (3) cameras which provide full coverage of entire visiting area.
- Classroom / Education area: Each classroom faces outside, with exterior windows that allow for full view of classroom. Each classroom has at least one (1) camera, some classrooms have two (2).
- Info Center / Service Bldg.: Numerous cameras in place, full coverage, no blind spots observed.

• Dining Hall: Large dining hall area, divided into two separate seating areas. Meals are served three (3) times per day. There are numerous cameras within the dining hall (3), food prep (2), food storage (2), hot storage, and food serving line (3). Approximately ten (10) cameras provide complete coverage of dining hall.

Noted area of concern: Related to the grievance box located outside of window "A" which is utilized for both inmate grievances and PREA concerns. Grievance/PREA box was locked with a padlock; however, it had been pried open allowing this auditor to read the grievance that had been placed into the box, reflecting all inmate identifiers, including inmate concern, which was not a PREA item. Box needs to be secured in a way to prevent vandalism.

Formal interviews were conducted on 7/8/19 Random staff, specialized staff, random and targeted inmate interviews were conducted by the auditor. The number of inmates housed at Solano County Jail on the first day of the on-site audit was 2267

A total of inmate interviews conducted: 43

- Random inmates – 29
- Youthful Inmates - 0
- Physically disabled, blind, deaf, and/or hard of hearing inmates – 2
- Limited English Proficient - 3
- Cognitively disabled inmates – 0
- Gay and/or bisexual inmates – 2
- Transgender or intersex inmates – 3
- Inmates in segregation for risk of victimization - 0
- Inmates who reported sexual abuse – 1
- Inmates who disclosed victimization during a risk assessment - 3

A total of staff interviews were conducted: 47

- Random staff – 14
- Director / designees-Sheriff
- Superintendent -Captain
- Contract administrator
- PREA Coordinator -1
- PREA Compliance Manager - 1
- Intermediate or higher level supervisors - 2
- Line staff who supervise youthful inmates - 0
- Education and program staff who supervise youthful inmates - 0
- Medical and mental health staff - 3
- Human resources staff - 1
- SAFE/SANE hospital staff – 1
- Volunteers-2
- Contractors - 4
- Volunteer Coordinator-0
- Investigators -4
- Staff who perform risk assessments - 1
- Staff who supervise inmates in segregation - 0
- Incident review team members - 1
- Staff charged with retaliation monitoring - 1
- Intake staff - 1

- First Responders –Security - 1
- First Responders-non-security - 0
- Mail Room - 1
- IT Staff - 1
- Training Staff - 0
- Staff who respond to grievances - 1
- Victim Advocacy – 1
- Kitchen staff – 1
- Hearing/Disciplinary staff – 0
- Maintenance Staff - 0

Santa Clara County Jail provides 3rd party reporting of allegations of sexual abuse via the Sheriff's website. The information is listed in the Facility website – [https://www.sccgov.org/sites/sheriff/jao;refpr,s/\[ages/refpr,s/asp](https://www.sccgov.org/sites/sheriff/jao;refpr,s/[ages/refpr,s/asp)x - and includes citation of the Prison Rape Elimination act, their zero tolerance policy and contact information for reporting allegations of sexual abuse.

The onsite audit was completed on 7/12/19 with a closeout briefing with administrative staff. Attendees were the Undersheriff, PREA Coordinator, Facility Commander, Agency PREA Manager PREA Compliance Managers for both Claybank facility and the Main Jail, Classification Sergeant and the LGBTI Deputy. Auditor discussed the strengths and weaknesses discovered during the onsite audit phase. Auditor provided administrative staff with the post-audit schedule which included providing agency with the Interim Summary Audit Report within 45 days after the completion of the onsite audit. The auditor and agency will collaborate on the corrective action plans for any identified non-compliance issues. Agency will have 180-days to correct the non-compliant issues after which, the auditor has 30-days to submit the Final PREA Audit Report. Agency has 90-days to upload the Final Report to the agency website for public access following receipt of the Final Report.

The agency was informed that if necessary, auditor may need to return to the Elmwood Mens facility during the 180-day Corrective Action period to verify compliance with the PREA standards that were found non-compliant during the Interim Audit Phase.

## AUDIT FINDINGS

### Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Elmwood Correctional Complex in Milpitas located at 701 Abel Street, Milpitas. The facility provides care, housing, and retention of approximately 2,600 medium- and minimum-security male inmates. The facility employs 275 correctional officers, and 25 administrative support personnel and hosts a large number of volunteers and programs staff, approximately 300. The entire Elmwood Mens complex has an estimated operating budget of about \$32 million a year. On the first day of the onsite audit, The Elmwood inmate population was 2267.

The Elmwood Main buildings are similar in shape and size, some designed for indirect supervision of inmates, others for direct supervision. Elmwood Camp area is designed as military style barracks for minimum-security inmates.

### Inmate Programs:

#### Weekend Work Program / Public Service Program

The Santa Clara County Programs Division delivers services which cover a vast number of recipients including, the Department of Correction, community based organizations, the inmate population and the community at large.

#### Reentry Services

In order to decrease the number of individuals incarcerated and under probation and parole supervision, the County of Santa Clara is focusing on developing a comprehensive effort that addresses the needs and risks of former offenders. The County's Reentry Program represents a new way of doing business.

#### Inmate Welfare Fund

The purpose of the Inmate Welfare Fund Committee is to implement the provisions of California Penal Code Section 4025 which allows the County to establish, maintain and operate a store (commissary and vending services) at the jail so that inmates may purchase confectionary items, postage, writing materials, toilet articles, and supplies. All commissions received from commissary sales shall be deposited into an inmate welfare fund. The statute also requires that any money, refund, rebate, or commission received from an inmate telephone service provider be deposited into the inmate welfare fund.

<b>AUDIT FINDINGS</b>	
<p><b>Summary of Audit Findings:</b>            The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance. Auditor Note: No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.</p>	
<b>Number of standards exceeded:</b>	2
<b>Number of standards met:</b>	43
<b>Number of standards not met:</b>	0
<p><b>FINAL AUDIT SUMMARY REPORT:</b></p> <p>Number of Standards exceeded: 2            115.61, 115.64</p> <p>Number of Standards met: 43            115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.2, 115.53, 115.54, 115.62. 115.63, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403.</p> <p>Number of Standards not met: 0</p>	

## Standards

### Auditor Overall Determination Definitions

- Exceeds Standard  
(Substantially exceeds requirement of standard)
- Meets Standard  
(substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard  
(requires corrective actions)

### Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.11(a): PREA Policy #14.15 mandates zero tolerance toward all forms of sexual abuse and sexual harassment in all facilities it operates. Agency does not contract for the confinement of its inmates. This policy outlines the implementation of agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment to include protocols initiated upon receipt of allegations of sexual abuse and sexual harassment. Inmate, staff, contractor and volunteer sanctions for those found to have participated in prohibited behaviors are outlined to include definitions of prohibited behaviors regarding sexual abuse and sexual harassment. Policy also provides a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. LGBTQI Policy #14.17 outlines Santa Clara County Sheriff's Office plan to receive, evaluate, house and provide secure, safe and humane custody of all persons, including lesbian, gay, bisexual, transgender, questioning/queer, and intersex(LGBTQI), who are lawfully committed or held for confinement by the Sheriff s Office until their lawful and appropriate release or transfer to another authority. The policy is intended to provide supplemental guidelines to staff on identification of LGBTQI inmates, searches, and decisions regarding housing and programming, and access to programs, services, commissary, toiletry, and clothing items. Staff are expected to treat inmates with respect and maintain professional positive interactions and effective communication with inmates. Staff shall not use racial, ethnic, homophobic or other derogatory language towards an individual's gender.</p> <p>115.11(b): Review of Santa Clara County Sheriff's Agency Organizational Chart and Custody PREA Organizational Chart 2019 identifies the PREA Coordinator at the Captain's level 3rd in line from the Sheriff. The PREA Coordinator reports to the Assistant Sheriff. Interview with the PREA Coordinator indicates she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. The agency provided an additional position as PREA Management support which handles the day to day coordination of all PREA related activities within each of the agency's three facilities.</p> <p>115.11(c): Review of Santa Clara County Sheriff's Custody PREA Organizational Chart 2019 designates PREA Compliance Manager (PCM) at each of its three facilities. The PCM is at the Deputy Sheriff position and reports to the PREA Coordinator. Interview with the PREA Compliance Manager indicates that he possesses sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p>

<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.12(a) and 115.12(b): N/A – Standard 115.12 does not apply to this Agency/Facility as Agency has no contracts for the confinement of inmates.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.12.</p>

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.13(a): Policy 1.25 Staffing Plan mandates the Department of Correction to have a written Staffing Plan, and to identify staffing levels that will adequately meet the safety, security, service, program and legal requirements. The Facility Authorized Staffing Level is the level of staffing as determined by the Division Commander to run routine operations in a facility, to perform all the tasks and responsibilities for compliance with minimum jail standards, to operate the facility in a safe and secure manner, and to ensure inmates have adequate access to staff, programs and services. The Facility Minimum Staffing Level is the level of staffing as determined by the Division Commander to run essential operations and some routine operations. Essential operations include but are not limited to Medical/Mental Health Services, Attorney and Official Visits, Courts and Meals. Modifications to all other routine operations will be made at the discretion of the Sergeant and Watch Commander when staffing is at minimum. If modifications are necessary, the Watch Commander will take into consideration the overall level of staffing in the facility, which day of the week is affected (e.g. holiday, weekend day with no courts, or a day with no visiting), compliance with Title 15, Minimum Jail Standards, and the safety and security of the facility. Officers will not modify or suspend routine operations without prior approval by the Sergeant. The Main Jail and Elmwood Complex's will be staffed seven days per week, 24 hours a day. In accordance with the Department's Policy #1.27, Overtime Staffing, overtime may be used to supplement staffing to remain at Facility Authorized Staffing Levels. PREA Policy #14.15 mandates that prior to the annual Staff Transfer, each Custody Captain shall assess authorized staffing levels and submit documentation to the PREA Coordinator for any recommended changes to authorized staffing levels as well as any requests for video monitoring systems enhancements and other monitoring technology with respect to sexual abuse prevention within the custody facilities. Agency provided auditor with a copy of the 2018 Main Jail Staffing Plan which was approved by the Main Jail Division Commander and the agency PREA Coordinator on 1/12/18. The plan outlines characteristics for each housing unit in the Main Jail. Inmate population, inmate programs, training, and prevalence of substantiated and unsubstantiated incidents of sexual abuse, staffing formula, staffing positions, history, current status of the main jail and recommendation for additional staff and video monitoring upgrades is discussed. There have been no judicial findings of inadequacy or findings of inadequacy from Federal investigative agencies, internal or external oversight bodies. Since last PREA audit which was conducted in 2015, the average daily number of inmates has been 1034 and the staffing plan for the Main Jail is predicated upon the maximum inmate population capacity of 1361. Interview with the Facility Commander and PREA Coordinator indicates the facility does have a facility specific staffing plan which discusses criteria identified in standard provision 115.13(a). Annual staffing plan reviews are conducted monthly by reviewing the daily staffing roster to include support staff and sworn staff numbers.</p> <p>115.13(b): N/A - Agency indicates there have been no deviations from the staffing plan over the past 12 months. Interview with the Facility Commander indicates facility documents all incidents of non-compliance with the staffing plan through notations on the daily jail report, annotating adjustments to staffing.</p>

15.13(c): Agency provided auditor with a copy of the Staffing Plan Review Board meeting minutes which occurred on 2/7/19. During the meeting, the staffing plans for all three facilities operated by the Santa Clara County Sheriff's department was discussed and changes/updates were made to the Elmwood complex facilities staffing plans. The Main Jail staffing plan was approved by the Main Jail Division Commander and the PREA Coordinator on 1/28/19. Interview with the PREA Coordinator indicates she is consulted and collaborates on staffing plan reviews to see whether adjustments are needed to the staffing plan, monitoring technology or allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. Review of 2017 Main Jail Staffing Plan and 2018 Staffing Plan Review Board meeting minutes indicates the PREA Coordinator's participation in the discussions and changes/updates recommended.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 13.13 Juvenile Inmates identifies procedure for housing for inmates who were booked &amp; housed as adults &amp; later claim or are suspected to be juveniles. Procedure indicates inmate is to be immediately separated from the inmate population and mandates sight and sound separation between juvenile and adult inmates before being transported to juvenile hall. Over the past 12 months no youthful inmates have been housed at the Santa Clara County Main Jail.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.14.</p>

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.15(a): PREA Policy #14.15 mandates staff who supervise inmates will receive cross-gender supervision training &amp; training shall be tailored to the gender of inmates at the employee's facility. No cross gender body cavity or strip searches have been conducted over the past 12 months. Policy specifically prohibits cross-gender strip and cross-gender visual body cavity searches of inmates are prohibited except under exigent circumstances. Search Policy 09.05 mandates a Watch Commander or high ranking commander must approve a visual body cavity search of inmate. All staff members present during a physical body cavity search of an inmate must be of the same sex as the inmate except for authorized medical personnel. Agency provided auditor with copy of the Cross-Gender Supervision power-point and lesson plan.</p> <p>Interview with non-custody nurse indicates the only exigent circumstances that would require cross-gender strip searches and/or visual body cavity searches is if a violent crime or weapons were involved. Same sex deputy would conduct the search with supervisor's approval. The nurse is not aware of any instance where these types of searches were conducted.</p> <p>115.15(b): Policy 14.15 &amp; Policy 09.05 prohibits cross gender pat-down searches of female inmates absent exigent circumstances. Such searches will be documented if conducted. Over the past 12 months, no cross gender pat down search was conducted. The facility does not restrict female inmates access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. Agency provided auditor with copy of the Cross-Gender Supervision power-point.</p> <p>Interview with a random sample of 12 staff elected from list of all staff assigned to all four shifts during the onsite audit indicates female staff are always on duty to conduct pat-down searches of female inmates. If female staff is not present on any of the housing floors, a female custody staff member can be requested from booking or medical which is manned 24/7 with female staff. Informal interview with a female inmate indicates female staff only conducts pat-down searches of female inmates. There has not been an instance where facility restricted regular programming or out-of-cell opportunities due to lack of female custody staff to conduct a pat-search.</p> <p>115.15(c): Policy 14.15 &amp; Policy 09.05 prohibits cross gender pat-down searches of female inmates absent exigent circumstances. Such searches will be documented if conducted. Any and all cross-gender strip searches and cross-gender visual body cavity searches be documented. No cross gender pat down searches were conducted over the past 12 months.</p> <p>115.15(d): PREA Policy #14.15 mandates that all inmates will be allowed to shower, perform bodily functions, and change clothing without non-medical 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. All staff of the opposite gender than the inmates they are supervising or interacting with shall announce their presence when entering the inmate housing unit. Admin Directive #2016-014 mandates that the cross-gender announcements MUST be made when badge staff of the opposite sex first comes on shift in a dorm/housing</p>

area. Additional announcements would be warranted when the opposite sex badge staff member has been out of the dorm housing unit for an extended period of time (breaks, lunch, welfare checks in other dorms, etc.). This will not apply to ""quick"" exits and entrances back in and out of the dorm. Main Jail Directive 2016-020 Cross-Gender Staff Announcement mandates that when badge staff that are of the opposite sex than the housed inmates enter a direct supervision housing unit, that badge staff member will announce loudly in the dayroom area that there is a male/female staff member present in the dorm prior to conducting any inmate interaction, welfare checks, etc. When badge staff that are of the opposite sex than the housed inmates enter an indirect supervision housing unit, that badge staff member will make a dorm announcement when entering the unit. When badge staff that are of the opposite sex than the housed inmates enter a linear-style housing unit, that badge staff member will announce his/her presence in each housing area. The cross-gender announcements MUST be made when badge staff of the opposite sex first comes on shift in a dorm/housing area. Additional announcements would be warranted when the opposite sex badge staff member has been out of the dorm/housing unit for an extended period of time (breaks, lunch, welfare checks in other dorms, etc.). This will not apply to ""quick"" exits and entrances back in and out of the dorm. Supervisors should ensure this information is read at Squad Briefings. Interview with a random sample of 12 staff indicates staff always conducts announcements when entering the housing unit of opposite gender inmates. Staff also indicates they conduct announcements for cross-gender visitors or medical staff upon entering the unit. Interview with medical staff indicates housing deputies announce their presence when entering a cross-gender housing unit. Interview with a Random Sample of 17 inmates selected from all inmates currently housed at Main Jail during the onsite audit indicates the vast majority of responses were that cross-gender staff do not announce when entering the housing unit. During the onsite audit, auditor noticed a number of housing units were entered by cross-gender staff and announcements were not conducted which verifies inmates' statements. The only cross-gender announcements that were made was when the PREA Compliance Manager entered the housing unit. This practice is clearly not institutionalized. During the onsite physical plant review, auditor observed perforated frosting on cell windows which allow staff to view inmates during toileting:

M2 & M3 housing

M4 & M5 holding cells

M8 Transportation - 8 holding cells

Health Services holding cells

115.15(e): PREA Policy #14.15 mandates staff shall not conduct a pat search of physical examination of a transgender or intersex inmates for the sole purpose of determining the inmates' genital status. No such searches have occurred over the past 12 months.

Interview with a random sample of 12 staff indicates policy prohibits the search of a transgender or intersex inmate for the sole purpose of determining their genital status. Staff indicates they were trained during the refresher training which was conducted over the past six months and during the cross-gender power-point training. Interview with a Transgender inmate indicates she has not experienced any inappropriate searches and was asked which gender of staff she elects to conduct a pat-search when she was in booking.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.15(d)-1 and 115.15(d)-2. Corrective action is required.

Corrective Action Recommended:

115.15(d)-1: Agency to provide auditor with written or electronic verification that all staff are trained in the requirement that all staff of the opposite gender are required to announce their presence when entering an inmate housing unit in accordance with the PREA Standard.

115.15(d)-2: Agency to ensure the following cell windows identified above have been repaired to a degree that inmates are able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing breasts, buttocks or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks.

M2 & M3 housing

M4 & M5 holding cells

M8 Transportation - 8 holding cells

Health Services holding cells

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20.

Corrective Action Completion 8/7/19:

115.(d)-1: Auditor erred in making this corrective action. Announcements were in fact made in the housing units as we entered. This Corrective Action Recommendation is moot.

115.15(d)-2: On 8/7/19, Agency provided auditor with holding cell photos of M8 Transportation holding cells, holding cells M4, M5, housing cells M2 and M3. All had privacy screens on the windows to dissuade cross-gender viewing during toileting. Health Services holding cells M-1 to M-5 had magnetic shields on the doors to be used when inmates are placed in the cells to dissuade cross-gender viewing during toileting. These are the same magnetic shields utilized in the Processing Unit when inmates are transferred from Main Jail Intake unit pending processing, PREA video viewing and housing assignments.

The agency/facility has met the requirements of Standard provision(s) 115.15(d) completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.15.

115.16	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.16(a): PREA Policy 14.15, Custody ADA Plan Policy 13.11, and Mentally Disordered Inmates Policy 13.17, PREA Pamphlet in both English, Vietnamese &amp; Spanish, PREA Posters in English, Vietnamese &amp; Spanish were reviewed by Auditor. Supporting documentation such as pamphlet inserts and policy narrative regarding verbal communication to verify disabled inmates are provided effective communication as it relates to PREA education. Policy requires posted signs in all housing units to provide effective communication and understanding for disabled and non- English speaking inmates. Policy mandates staff document on PREA Reporting Information Worksheet all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency, TDD &amp; TTY access for deaf &amp; blind inmates. Agency has provided auditor with Language Line/Voiance and Partners in Communications interpreter contracts, which verifies agency’s commitment to providing all inmates with effective communication.</p> <p>Interview with an Agency Head designee indicates the agency has established procedures to provide inmates with disabilities and inmates who are limited English proficient 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 through the inmate handbook which is currently undergoing revision. The handbook is provided in the three dominant languages in the facility. A 4th grade education video is provided in each housing unit and plays weekly. PREA video plays 24/7 in intake/booking area. Agency has provided 27 multi-service deputies that are trained in American with Disabilities Act coordination and assistance. Auditor informal interview with one of the ADA deputies indicates he is available in his assigned housing unit and on-call throughout the facility when needed. Interview through a staff interpreter with a Limited English Proficient Spanish speaking inmate indicates the facility did not provide him with information about sexual abuse and sexual harassment in Spanish. Booking and classification failed to provide him with staff or contract interpreters to assist with understanding the documents or process. Review of inmate’s classification documentation indicated that his documentation was in Spanish and he signed for his Inmate Handbook and acknowledged receiving his PREA rights and understanding the reporting methods.</p> <p>115.16(b): PREA Policy 14.15, Custody ADA Plan Policy 13.11, and Mentally Disordered Inmates Policy 13.17, PREA Pamphlet in both English, Vietnamese &amp; Spanish, PREA Posters in English, Vietnamese &amp; Spanish were reviewed by Auditor. Supporting documentation such as pamphlet inserts and policy narrative regarding verbal communication to verify disabled inmates are provided effective communication as it relates to PREA education. Policy requires posted signs in all housing units to provide effective communication and understanding for disabled and non- English speaking inmates. Policy mandates staff document on PREA Reporting Information Worksheet all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency, TDD &amp; TTY access for deaf &amp; blind inmates. Agency has provided auditor with Language Line/Voiance and Partners in Communications interpreter contracts, which verifies agency’s commitment to providing all inmates with effective communication. Interview conducted through a custody staff interpreter with a Limited English Proficient Spanish speaking inmate indicates the facility did not provide him with information about sexual abuse and sexual harassment in Spanish. Booking and</p>

classification failed to provide him with staff or contract interpreters to assist with understanding the documents or process. Review of inmate's classification documentation indicated that his documentation was in Spanish and he signed for his Inmate Handbook and acknowledged receiving his PREA rights and understanding the reporting methods.

115.17	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.17(a): PREA Policy 14.15 prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who:</p> <p>(1) 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);</p> <p>(2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or</p> <p>(3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</p> <p>Auditor reviewed a random sample of 21 custody staff, 13 contractors and 12 volunteers selected from roster of all hired and promoted to the Elmwood facility over the past 12 months. Records review verified that all selected staff, contractors and volunteers had both state and national background checks (DOJ, and FBI) conducted and cleared. All 21 custody staff cleared background checks prior to their hire date. Additional findings are as follows:</p> <p><b>CUSTODY STAFF:</b></p> <ol style="list-style-type: none"> <li>1. No data provided to verify the 3 required questions as outlined in standard provision 115.17 were issued and completed prior to hiring for all 21 custody staff.</li> <li>2. No data provided to verify the 3 required questions as outlined in standard provision 115.17 were issued prior to promotions for 4 of the 5 identified staff who were promoted between 2016 &amp; 2017.</li> <li>3. No data provided to verify agency contacted prior institution employers during the initial application period prior to hire.</li> </ol> <p><b>CONTRACTOR STAFF:</b></p> <ol style="list-style-type: none"> <li>1. All 11 contractors cleared their background checks prior to their hire date</li> </ol> <p><b>VOLUNTEERS:</b></p> <ol style="list-style-type: none"> <li>2. 1 volunteer completed background check after their start date</li> </ol> <p>115.17(b): PREA Policy 14.15 mandates that any and all incidents of sexual harassment shall be considered in determining whether to hire or promote anyone, or enlist the services of, any contractor who may have contact with inmates. Interview with a Human Resources administrator indicates the agency considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> <p>115.17(c): PREA Policy 14.15 &amp; Policy 09.05 Hiring and Promotions mandates that before hiring new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local laws, performs a criminal background records check on all applicants. Over the past 12 months, criminal background checks were conducted on 52 people who may have contact with inmates, which constitutes</p>

100% of those hired over the past 12 months. Review of a random sample of 21 custody staff, 11 contractors and 12 volunteers verify that all completed criminal records background checks. There was no verification provided by agency that prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse.

Interview with a Human Resources administrator indicates there are no separate background checks for promotions. Both California Justice Information System and FBI/NCIC is utilized to conduct background checks on staff, contractors and volunteers. There is a subsequent arrest notification through the Department of Justice for anyone who has been fingerprinted (both custody and non-custody staff to include contractors). During the hiring process, agency makes best efforts to contact prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. Auditor's review of personnel file random sampling verified letters were sent out to prior employers prior to hiring.

115.17(d): PREA Policy 14.15 and Policy 09.05 Hiring and Promotions mandates that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates. Agency indicates that over the past 12 months criminal background checks were conducted on 100% of the 335 contractors that were hired during that period. Auditor conducted review of personnel records on random sample of 11 contractors selected from list of all contractors assigned to the Santa Clara County Elmwood Facility. Records review determined that out of the 11 reviewed records, four had both a state and national background check clearance completed prior to their start date.

115.17(e): PREA Policy 14.15 mandates that in lieu of the PREA requirement to conduct employee criminal background records checks at least every five years, employees and contractors shall report within 24 hours when arrested or charged with any violation of the law associated with sexual abuse, sexual misconduct or sexual harassment. The policy, in fact imposes upon employees and contractors a continuing affirmative duty to disclose sexual misconduct. In addition, all employees and contractors are fingerprinted and as of 2017 mandated to have state and national criminal background checks completed. If arrested for any offense, the Department of Justice notifies the hiring agency of the arrest. The Personnel Captain will take immediate and appropriate action upon receipt of such notice. Review of 11 contractor personnel files indicated that contractors renews their clearances every 2 years through renewal application

Interview with a Human Resources administrator indicates the Department of Justice provides subsequent arrest notification for both staff and contractors who have completed background checks through the FBI process.

115.17(f): PREA Policy 14.15 mandates that "Agency ask all job applicants who may have contact with inmates about previous sexual abuse/sexual harassment in written applications and/or interviews for hiring & promotions or written self-evaluation conducted as part of reviews of current employees. The agency also imposes upon employees a continuing affirmative duty to disclose any such misconduct. Interview with Human Resources Director indicates a self-disclosure mandate is provided on the background form all job applicants and employees prior to promotion. Review of personnel records verify the self-disclosure forms. Agency provided auditor with copies of employee application forms (Personal History Statement, Pre- Background Questionnaire and Pre-background Interview Questionnaire) for

verification of compliance. Interview with a Human Resources administrator indicates agency uses the Peace Officer Standards and Training application for all sworn and non-sworn applicants. This application has the three questions:

- (1) 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);
- (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

The facility imposes upon employees a continuing affirmative duty to disclose any such misconduct. Auditor review of personnel files application process verifies this statement.

115.17(g): PREA Policy 14.15 mandates that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Auditor's review of the Peace Officer Standards and Training application for all sworn and non-sworn applicants verifies that it contains the same narrative as is required by this standard provision.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.17(a), 115.17(c) & 115.17(d). Corrective action is required.

Corrective Action Recommended:

115.17(a)-1: Agency to provide a list of staff, promotional staff and contractors employed in the Elmwood facility 90-days after receipt of the Interim Report.

115.17(a)-2: Auditor will conduct random selections of staff hires, staff promotions and contractors that have been hired or promoted within 90 days of the Interim Report in order to review said files/documentation to verify compliance with Standard 115.17.

115.17(c)-1: Agency to provide a list of staff, promotional staff and contractors currently employed in the Elmwood facility 90-days after receipt of the Interim Report.

115.17(c)-2: Auditor will conduct random selections of staff hires and contractors that have been hired or promoted within 90-days of the Interim Report in order to review said files/documentation to verify compliance with Standard 115.17.

115.17(d)-1: Agency to provide a list of contractors currently employed in the Elmwood facility 90-days after receipt of the Interim Report.

115.17(d)-2: Auditor will conduct random selections contractors that have been hired or promoted within 90-days of the Interim Report in order to review said files/documentation to verify compliance with Standard 115.17.

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20

Corrective Action Completion 8/29/19 :

115.17(a): On 8/29/19 Agency provided auditor with selection of 25 staff who were hired in 2018. Auditor selected 10 random staff records for review. Of the 10 selections, backgrounds had provided their former employers letters in accordance with standard provision 115.17(c)-2. None of the recent hired employees worked at a prior institution. Response from the PREA Help Desk regarding Standard Provision 115.17(a) indicates that the 3 required questions are not intended for Contractors, though, 115.17(a) prohibits the agency from enlisting a contractor that has been involved in any violation of the 3 required questions identified in 115.17(a). To ensure agency does not enlist any such contractor should be accomplished through the requirement of the criminal background records check pursuant to 115.17(d). Review of personnel records indicates that background records checks were successfully completed for all contractors prior to hire.

115.17(c): On 8/29/19 Agency provided auditor with selection of 25 staff who were hired in 2018. Auditor selected 10 random staff records for review. Of the 10 selections, backgrounds had provided their former employers letters in accordance with standard provision 115.17(c)-2. None of the recent hired employees worked at a prior institution.

115.17(d): On 8/6/19, Agency provided auditor with updated HR Records Review Tool, using the same random selected contractors as selected during the pre-audit phase. Agency conducts CJIC, DOJ & FBI clearances on contractors. CJIC provides background clearance from NCIC. All contractors have been cleared through NCIC prior to their hire dates.

The agency/facility has met the requirements of Standard provision(s) 115.17(a), 115.17(c) and 115.17(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.17

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.18(a): N/A - The agency/facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit which occurred in 2016.</p> <p>Interview with Facility Commander and Agency Head designee indicates agency collaborates with American with Disabilities Act (ADA) inspectors and consultants to ensure none of the construction has any issues or conflicts with PREA. They look for blind-spot areas and redesign to meet both PREA and ADA requirements. Agency is currently undergoing reconstruction of a number of housing units in Main Jail North as was verified by auditor during the physical plant review during the onsite audit phase. Main Jail South tower is scheduled for demolition and replacement in late 2018/early 2019.</p> <p>115.18(b): The agency/facility has 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. Agency provided auditor with a copy of the 2017 Security Electronics Site Device Plan for proposal of fiber optics cable and camera installation throughout the Elmwood Facility to include housing units to verify installation of updated video monitoring system.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.21(a): Policy 14.15 mandates that where sexual abuse is alleged, the investigation shall be conducted by JCI Unit investigators that have received special training in sexual abuse investigations in confinement settings. All sexual abuse, sexual assault, sexual misconduct and sexual harassment allegations will be referred to the JCI Unit. Only criminal investigators who have received special training in investigating sexual abuse will conduct the investigation."Staff investigating allegations of sexual abuse and sexual assault shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. The protocol shall be developmentally appropriate for youth, where applicable. Review of evidence protocol indicates that there is sufficient technical detail to aid responders in obtaining usable physical evidence.</p> <p>Interview with random sample of 13 staff indicates that all staff are aware of the 1st Responder protocols and their responsibilities in the event they are the the first person to be alerted that an inmate has alleged being the victim of sexual abuse.</p> <p>115.21(b): Policy 14.15 mandates that the protocol shall be developmentally appropriate for youth, where applicable.</p> <p>115.21(c): Policy 14.15 mandates that In circumstances where evidentiary or medically-appropriate forensic medical examinations are necessary to investigate and process complaints of inmate sexual abuse or sexual assault, such examinations will be provided, whether on-site or at an outside facility, without financial cost to the victim inmate. Such examination shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs), where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its' efforts to provide SAFEs or SANEs. Agency reports that 1 SAFE/SANE examination has been performed over the past 12 month. There has been no exams performed by a qualified medical practitioner during the past 12 months.</p> <p>Interview with SAFE/SANE Director indicates that the SAFE/SANE nurses at Valley Medical Center are responsible for conducting all forensic medical examinations for Santa Clara County Jail inmates. They respond to provide anyone who needs forensic exams throughout the Santa Clara County system. They are available at the Valley Medical Center, where forensic exams are conducted, 24/7. Exams are conducted in the Emergency Department. During document review of sexual abuse investigations, auditor was provided the investigative documents for the inmate mentioned in the above paragraph who was treated through a forensic exam. The inmate was interviewed at length from SAFE/SANE, with an advocate present. The medical exam included use of a rape kit during the forensic exam, which captured evidence using the prescribed rape kit, was sealed and provided to the investigative detective.</p> <p>115.21(d): Agency provided auditor with the YMCA Rape Crisis Support fully executed MOU</p>

from 7/1/18 to 6/30/19 extension. MOU renewal is currently being negotiated. Agency provide auditor with verification documentation. Policy 14.15 mandates that Sergeants, or investigators responsible for investigations of inmate complaints of sexual abuse, sexual assault, sexual harassment or sexual misconduct, will make available to the victim inmate an advocate from a rape crisis center (YWCA) or a qualified staff member from Adult Custody Mental Health Services.

Interview with the PREA Compliance Manager indicates that the YWCA serves as the community -based organization that provides advocacy and emotional support and crisis intervention during forensic medical examination process and investigatory interviews. There were no inmates who reported sexual abuse over the past 12 months. There was no inmate housed at the facility who reported a sexual abuse.

115.21(e): Policy 14.15 mandates that Inmates wishing to report incidents of sexual abuse, sexual assault, sexual misconduct or sexual harassment to a public or private entity or office that is not part of the agency can do so by:

1. Calling the YWCA Rape Crisis Hotline
2. Santa Clara County Human Relations Office

Interview with the PREA Compliance Manager indicates that the PREA Manager works closely with the YWCA to ensure they are meeting the PREA requests. Interview with YWCA Program Manager verifies that advocates receive 65 hours of training on sexual assault, counseling skills and PREA training through the Santa Clara County Jail. Advocates are available for sexual assault forensic exams to provide emotional support, advocates are reachable through the 24 hour hotline, in-person sexual assault response, legal advocacy and service aftercare. Auditor verified the 24 hour hotline works by testing the hotline phone system and spoke with a YWCA advocate.

115.21(f): Agency is responsible for both administrative and criminal sexual abuse investigations.

115.21(g): N/A - Auditor is not required to audit this provision per DOJ

115.21(h): Agency attempts to make a victim advocate from the YWCA Rape Crisis Center available to inmates per standard provision 115.21(a). An advocate is available 24/7.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.21.

115.22	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.22(a): Agency provided auditor with 55 sexual abuse and sexual harassment administrative and criminal investigative reports which occurred over the past 12 months. 40 cases are closed, 12 cases are still ongoing. Of the 12 open cases, only 1 occurred in 2019 and 3 cases involve staff misconduct and are they continue to be investigated by Internal Affairs. 3 cases are pending Incident Review Board. Review of all cases determined that 1 case was found to be substantiated, 24 cases were found to be unsubstantiated, 18 cases were unfounded. 23 cases were for sexual harassment and the remainder were related to sexual abuse. Investigative documentation did not provide reasoning why the 2018 cases remain open.</p> <p>Interview with the Agency Head designee indicates that County Investigations and Internal affairs initiate investigations. Internal Affairs investigate administrative cases, Jail Crimes and Major Crimes Unit investigate criminal cases. In the initial stages, the victim is interviewed and made to feel whole and advocate resources are made available to the victim. Preliminary findings are provided to the Captain for referral to specific investigations unit for further action.</p> <p>115.22(b): PREA Policy 14.15 mandates Agency ensures administrative or criminal investigations are completed for all allegations of sex abuse &amp; sex harassment. Policy 9.29 Criminal Investigations Policy &amp; Procedure Manual mandates that by agreement, the Sheriffs Office is responsible for conducting criminal investigations in the jail. It is the responsibility of Correctional officers and Sheriffs personnel assigned to the Department of Correction to report and to investigate crimes. The investigation of crimes shall be conducted under the direction of, or by Sheriffs personnel. A Sheriffs supervisor shall be promptly notified of every incident in which a crime has, or is suspected to have, occurred. The Sheriffs supervisor shall promptly notify the Watch Commander and keep him or her apprised of the incident.</p> <ol style="list-style-type: none"> <li>1. If it has been determined that a crime has occurred, the Sheriffs supervisor in charge of the crime scene will direct and assign correctional officers and Sheriffs staff in specific tasks related to the investigation of the crime.</li> <li>2. When the nature of the crime dictates, the Sheriffs supervisor shall contact the Sheriffs Investigations Unit and request a Sheriffs investigator.</li> <li>3. The Sheriffs supervisor will ensure the crime scene is secured and that inmate suspects and witnesses are placed in separate holding cells.</li> <li>4. The Sheriffs supervisor will coordinate a search of the crime scene and ensure that: <ol style="list-style-type: none"> <li>a. Evidence in the crime scene is identified, preserved and collected.</li> <li>b. Photographs are taken of the evidence before it is moved or processed into evidence.</li> <li>c. Weapons, material or instruments, which may have been used to cause death, shall not be disturbed when such items pose no threat to security.</li> <li>d. Items that pose a threat to security are gathered by a Sheriffs supervisor and maintained in his or her possession until released to the proper authority or placed into evidence.</li> <li>e. An evidence technician collects evidence from crimes in which a Sheriffs investigator is assigned.</li> <li>f. Suspects and victims are photographed and/or video taped if injured.</li> </ol> </li> </ol>

- g. Clothing is taken from both suspect and victim and placed into evidence.
- h. Strip searches of involved inmates and searches of their cells are conducted to locate and preserve evidence

Interview with investigative staff indicates that the Music policy requires that allegations of sexual abuse or sexual harassment referred for investigations to an agency legal authority to conduct criminal investigations, unless delegation does not involve potential he criminal behavior.

115.22(c): N/A - Santa Clara County Sheriff's Department conducts its own criminal investigations. Standard provision 115.22(c) does not apply to this Agency.

115.22(d): N/A - Agency is not required to audit this provision per DOJ

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.22.

115.31	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.31(a): New Employee PREA Handout provides the following key points of PREA:  The law provides guidelines to detect, prevent, identify and deter incidents of sexual abuse and sexual assault in detention facilities. It also requires information and resources to protect individuals from sexual abuse and sexual assault in detention facilities.</p> <ul style="list-style-type: none"> <li>• The Santa Clara County Sheriff's Office has a ZERO-TOLERANCE POLICY relating to illegal sexual acts, sexual harassment or sexual misconduct in any of its' jail facilities. This policy applies both to staff-inmate as well as inmate-inmate sexual relationships.</li> <li>• It is the responsibility of all staff to take these matters seriously if they are brought to your attention and to act on them immediately.</li> <li>• PREA applies to both males and females under correctional staff supervision and male and female staff members, both custodial and non-custodial, including contractors and volunteers.</li> <li>• Sexual activities and sexual abuse between inmates and staff or between inmates are strictly prohibited by department policy.</li> <li>• It is staff's responsibility to provide a safe environment for inmates and staff, free of sexual harassment, sexual abuse and retaliation.</li> <li>• All allegations of sexual abuse are to be taken seriously and need to be documented and investigated.</li> <li>• It is our agency's responsibility to refer substantiated cases for prosecution."</li> </ul> <p>Agency provided auditor with a copy of the PREA training power-point, PREA Lesson Plan and PREA Policy 14.15, which indicates employees are trained in:  The agency trains 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.  The dynamics of sexual abuse and sexual harassment in confinement.  The common reactions of sexual abuse and sexual harassment victims.  How to detect and respond to signs of threatened and actual sexual abuse.  How to avoid inappropriate relationships with inmates.  How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates.  How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>Interview with a random sample of 14 staff indicates that staff can recite topics covered during the PREA refresher training conducted in 2018. Staff recently hired participated in PREA training in the academy can recite majority of all 10 topics covered in the initial comprehensive PREA training.</p> <p>115.31(b): Policy 14.15 PREA mandates that staff who supervise inmates will receive cross-gender supervision training. The training shall be tailored to the gender of the inmates at the employees' facility. Employees shall receive refresher training if the employee is reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa.</p>

Review of 21 random selection of staff training records indicates all received PREA training, 5 custody staff received PREA training within 2 to 3 months after their hire date. All received cross-gender training in both 2017 and 2018.

115.31(c): Policy 14.15 PREA mandates that all Sheriff's Office/DOC employees and all other county employees working/assigned to perform services for the Department shall be required to receive PREA training within 90 days of hire and take refresher training every two years.

This is to ensure that all employees know the agency's current sexual abuse, sexual assault, sexual harassment and sexual harassment policies and procedures. In years in which an employee does not receive training, the agency shall provide refresher information on current sexual abuse, sexual abuse, sexual misconduct and sexual harassment policies.

Review of 21 random selection of staff training records indicates all received PREA training, 5 custody staff received PREA training within 2 to 3 months after their hire date. All received cross-gender training in both 2017 and 2018.

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.32(a): Policy 14.15 mandates that all staff, including contractors and volunteers responsible for supervising inmates or who may come in contact with inmates, in custody facilities and in all out-of custody programs will receive PREA training. PREA training shall, at minimum, consist of the following topics:</p> <ol style="list-style-type: none"> <li>1. The department's "zero-tolerance" policy for sexual abuse, sexual assault, sexual misconduct or sexual harassment;</li> <li>2. How to fulfill the responsibilities under agency sexual abuse, sexual assault, sexual misconduct and sexual harassment prevention, detection, reporting, and response policies and procedures;</li> <li>3. The right of inmates to be free from sexual abuse, sexual assault, sexual misconduct and sexual harassment;</li> <li>4. The right of inmates and employees to be free from retaliation for reporting sexual abuse, sexual assault, sexual misconduct and sexual harassment;</li> <li>5. The dynamics of sexual abuse, sexual assault, sexual misconduct and sexual harassment in confinement;</li> <li>6. The common reactions of victims of sexual abuse, sexual assault, sexual misconduct and sexual harassment</li> <li>7. How to detect and respond to signs of threatened and actual sexual abuse, sexual assault, misconduct and sexual harassment;</li> <li>8. How to avoid unauthorized and inappropriate relationships with inmates;</li> <li>9. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates;</li> <li>10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</li> </ol> <p>Volunteers and Contractors also complete the PREA/CLETS form which includes the Key Points of PREA, definitions of staff sexual misconduct, sexual harassment, avoiding inappropriate relationships with inmates, reporting sexual misconduct, effective communications with victims and PREA acknowledgement for the contractor and volunteer to sign. Agency also provided auditor with a copy of the Contractor and Volunteer course outline and Contractors Volunteers power-point, both of which are PREA compliant and meets training requirements.</p> <p>Agency indicates that 335 volunteers and contractors, who may have contact with inmates, have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Agency provided auditor with signed training roster and acknowledgement of this training from a total of 272 volunteers and contractors who attended this training from 8/22/18 to 4/13/19.</p> <p>Interview with random sample of 2 volunteers and 2 contractors who have contact with inmates verifies that they have been trained in their responsibilities regarding sexual abuse sexual harassment invention, detection, in response per agency policy and procedure.</p> <p>Document review of 12 volunteers and 13 contractors verify all received their PREA training prior to their start date except for 2 contractors where 1 contractor received PREA training 7 months after start date and 1 had no PREA training verification documentation.</p>

115.32(b): Agency PAQ indicates that the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. Review of the contractors and volunteers course outline, contractors and volunteers power-point and PREA-CLETS Form Final signed acknowledgement by contractors and volunteers, provided by agency, verifies that volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Interview with random sample of 2 volunteers and 2 contractors who have contact with inmates verifies that the training they received is based upon the services they provide and level of contact with inmates. The training included the agency's zero-tolerance policy regarding sexual abuse, sexual harassment and how to report such incidents. This training was verified through the signed contractor and volunteer training verification form.

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.33(a): Agency provided auditor with the PREA poster, PREA pamphlet in English and Spanish to include Sexual Assault pamphlet in Vietnamese, all provided to inmates during intake to inform them of the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. Agency reports that during the past 12 months, 100% of inmates admitted to the facility (26075), was provided this information during intake. Interview of intake staff verifies that before going to the housing unit inmates are provided the PREA pamphlet and inmate handbook. Inmates are required to read and sign the zero-tolerance statement and understanding. Inmates are required to review the PREA video in Processing before housing is initiated. The PREA video plays during programming in the housing units.</p> <p>Auditor was provided copies of the PREA poster, Sexual Assault pamphlet and PREA pamphlet in the various languages. Interview of 29 inmates verifies all were provided the same documentation and information provided to the auditor at intake at Main Facility and in Processing at the Elmwood facility.</p> <p>115.33(b): Agency reports that 100% (7579) inmates admitted to the past 12 months, whose link is staying with us so it was for 30 days or more, receive comprehensive education on their rights to be free from both sexual abuse, sexual harassment and retaliation. Inmates were also provided information on how to report incidents and on agency policy and procedures for responding to such incidents within 30 days of intake</p> <p>Interview with random sample of 29 inmates verifies they were provided their right not to be sexually abused or sexually harassed, how to report sexual abuse and sexual harassment and their right not to be punished for reporting sexual abuse or sexual harassment. Interview with intake staff indicates that immediately prior to being housed inmates are made aware of their rights under PREA.</p> <p>115.33(c): Agency reports that all inmates are provided their PREA rights and educated in PREA zero-tolerance by their date of booking, definitely within 72 hours of booking. Policy 14.15 PREA mandates that education for inmates are provided during initial Intake and Classification and also available in housing unit on dedicated channel. Agency provided auditor with a directive from the Elmwood Assistant Division Commander dated 12/6/17, which mandates that the PREA Information Loop should be turned on and continuously playing on Channel 12 in the Processing area. Inmates should be in the Processing area long enough to view the complete PREA presentation, which lasts approximately 20 minutes.</p> <p>Elmwood Men's facility does not house female inmates and retraining upon transfer to the Main Jail is not required as the policies and directives are similar.</p> <p>Policy 14.15 PREA mandates that a pamphlet entitled ""Sexual Assault Awareness"" shall be distributed to every inmate in each custody facility, initially at Booking Intake as well as upon transfer between the Main Jail and Elmwood complexes. A PREA informational video shall be shown to inmates within each housing unit at regular intervals. Both the pamphlet and the video explain the Department's ""zero-tolerance"" policies on sexual abuse, sexual assault, sexual misconduct and sexual harassment. Both the pamphlet and video outline reporting options for victims of sexual abuse, sexual assault, sexual misconduct and sexual harassment,</p>

as well as the right for any inmate to grieve his/her condition of their confinement. Elmwood Men's facility inmate transfer to the Main Jail does not require retraining upon transfer as the policies and directives do not differ from one another.

115.33(d): Policy 14.15 PREA mandates that all inmates will have meaningful access to all aspects of the Department's effort to prevent, detect, and respond to sexual abuse, sexual assault, sexual misconduct and sexual harassment including inmates with disabilities and limited English proficiency. All PREA communications, both written and verbal, will provide effective communication and understanding for disabled and non-English speaking inmates. Staff will document, on the PREA Reporting Information Worksheet, all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency. Inmate interpreters, inmate readers, or other types of inmate assistance will not be used except in limited circumstances where an extended delay in obtaining an effective interpreter would compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations.

Agency provided directive specific to classification staff which mandates protocol which identifies inmates who are limited in their reading skills or otherwise disabled. The protocol is as follows, "during every classification interview with an inmate, classification staff will have each and every inmate read a couple of basic sentences aloud that are PREA related. Classification staff will ask the inmate if they understood what they just read and the inmate can either confirm or deny that they understood. That confirmation or denial will be documented on the supplemental worksheet. If the inmate says that they do not understand, the classification deputy will attempt to explain the information contained in the sentences the inmate just read as simply and clearly as possible. If the inmate still does not understand, classification staff will fill out a med/psych referral for the inmate as possibly being developmentally disabled (DD) and potentially needing further assessment. That referral would be forwarded to the intake nurse for processing from there. This referral would also be documented on the supplemental PREA worksheet as box to be checked. A copy of the referral would then be attached to the entire PREA packet that gets submitted up the chain." Review of inmate education materials indicate the inmate handbook and sexual assault pamphlet are provided in English, Spanish and Vietnamese. Interpreters are provided should an inmate require them.

115.33(e): Policy 14.15 PREA mandates that staff will document, on the PREA Reporting Information Worksheet, all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency. Auditor verified compliance based upon the participation documentation provided by agency on the random sample of 29 inmate screening documentation which verifies the maintenance of PREA education.

115.33(f): Agency provides key information regarding agency's PREA policies continuously throughout the facility. Information is readily available or visible as it is posted throughout the facility and in housing units, inmate handbooks provided during intake and video in every housing unit. Auditor verified this during the physical plant review. Posters, pamphlet and inmate handbook is in English, Spanish and Vietnamese.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34(a): Policy 14.15 mandates required training for investigators conducting sex abuse investigations in a confinement setting. Where sexual abuse is alleged, the investigation shall be conducted by Jail Crimes Unit investigators that have received special training in Sexual Abuse Investigations in Confinement Settings. Training for all investigators is through the National Institute of Corrections (NIC). PAQ indicates agency employs 28 special investigators. Interview with 4 Investigative staff verify they receive training in conducting Sexual Abuse Investigations in a confinement setting NIC. Agency provided auditor with 28 certificates of Special Investigator training which auditor verified as compliant.</p> <p>115.34(b): The NIC specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. This was verified by auditor through the interview with investigative staff and copy of the training curriculum from NIC.</p> <p>115.34(c): Agency maintains documentation of investigator training completion, verified by the 28 NIC special investigator training certificates provided by agency to auditor.</p>

115.35	<b>Specialized training: Medical and mental health care</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1469 701">115.35(a): Policy 14.15 mandates all staff, contractors &amp; volunteers who supervise or come in contact with inmates will receive PREA training which consists of the 10 criteria identified with the badge staff training. Agency indicates 125 medical and mental health practitioners who work regularly at the facility but there are only 91% who work regularly at the facility have received PREA training. Interview with Medical and Mental Health Staff indicate they have received PREA training on all 4 criteria outlined in Standard provision 115.35(a). Most of the training received was addressed during their professional certification training in addition to the PREA training. Review of training records verify that all medical and mental health practitioners who work regularly at the Elmwood Men’s facility have attended training.</p> <p data-bbox="252 757 1469 913">115.35(b): N/A - Standard provision 115.35(b) is not applicable to this Agency/Facility. No forensic examinations are conducted at the SCCJ Elmwood Men’s Facility or Main Jail where the main clinic is located. Forensic examinations are conducted at Santa Clara Valley Medical Center.</p> <p data-bbox="252 969 1442 1088">115.35(c): Agency verifies they maintain documentation showing that medical and mental health practitioners have completed the required training by providing auditor with copies of signed training acknowledgements from 9 medical and mental health staff.</p> <p data-bbox="252 1144 1426 1216">Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.35(a). Corrective action is required.</p> <p data-bbox="252 1272 692 1305"><b>Corrective Action Recommended:</b></p> <p data-bbox="252 1317 1442 1435">115.35(a): Agency to provide auditor with documented or electronic training records which verifies that all medical and mental health practitioners who work regularly at the facility has received PREA training.</p> <p data-bbox="252 1491 1477 1610">Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20</p> <p data-bbox="252 1666 746 1700"><b>Corrective Action Completion 8/29/19:</b></p> <p data-bbox="252 1711 1461 1906">On 8/29/19, Agency provided auditor with copies of PREA training acknowledgement for the remaining 10 medical and mental health practitioners which were identified as not receiving PREA training prior to entering the facility. The signed acknowledgements determined that all 10 medical and mental health practitioners did in fact receive their PREA Orientation training prior to entry into the facility.</p> <p data-bbox="252 1962 1442 2080">The agency/facility has met the requirements of Standard provision(s) 115.35(a) completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.35.</p>



115.41	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.41(a): Policy 14.15 PREA mandates that all those detained or incarcerated be screened for history of sexual abuse at intake to identify history of sexually assaultive behavior and potential vulnerabilities. This requirement is not exclusive to custody environments. Interview with Risk Screening staff indicates that over the past 12 months 7570 inmates whose length of stay in the facility for 72 hours or more were screened per PREA mandate. Inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abuse b other inmates or sexually abusive toward other inmates. 100% of all inmates whose length of stay in the facility for 72 hours or more were screened. Interview with a random sample of 29 inmates indicate Classification conducted screening after booking. Review of 24 inmate screening files verify that all 24 inmates received initial screening within 72 hours of intake.</p> <p>115.41(b): Policy 14.15 mandates that all those detained or incarcerated be screened for history of sexual abuse at intake to identify history of sexually assaultive behavior and potential vulnerabilities. Agency indicates that in the past 12 months 16540 inmates entered the facility whose length of stay in the facility for 72 hours or more were screened per PREA mandate. 100% of all inmates whose length of stay in the facility for 72 hours or more were screened. Interview with random sample of 15 inmates indicate they were screened by Classification after booking. Review of 24 inmate screening files verify that all 24 inmates received initial screening within 72 hours of intake.</p> <p>115.41(c): Agency provided auditor with Form #10852-Intake-Classification Assessment Supplemental PREA Worksheet, which serves as the PREA objective screening instrument during intake to identify history of sexually assaultive behavior and potential vulnerabilities. Agency provided auditor with a copy of the screening instrument for the random sample of 24 inmate screening documentation selected by auditor. This documentation provides response from inmate and observation from classification staff to make a determination for inmates' housing and programming in a manner that provides for the inmate's safety.</p> <p>115.41(d): The screening instrument provides for 9 of the 10 criteria identified in Standard provision 115.41(d). Agency does not honor holding an individual solely for immigration purposes due to County Policy and approved by the Board of Supervisors of the County of Santa Clara per Board Policy 3.54 for Civil Immigration Detainer Requests, therefore, Criteria #10 is not included in the Classification Assessment PREA Worksheet. Auditor review of the intake classification worksheet-final 061416, (Santa Clara County version of the objective screening instrument), provides for 9 of the 10 criteria identified in Standard provision 115.41(d). Agency does not honor holding an individual solely for immigration purposes due to County Policy and approved by the Board of Supervisors of the County of Santa Clara per Board Policy 3.54 for Civil Immigration Detainer Requests, therefore, Criteria #10 is not included in the Classification Assessment PREA Worksheet.</p> <p>115.41(e): Policy 14.15 PREA mandates that Classification staff shall review the inmate's history for any documentation showing the inmate has a history of sexually aggressive</p>

behavior. If the results from the screening indicate a probability of victimization or sexually aggressive behavior, and an overall high level of risk, appropriate housing shall be implemented to ensure the safety of the inmate and others. Interview with Risk Screening staff indicates that the following information is considered:

Whether or not inmate was a victim of a sex crime and was it reported

If inmate is handicapped

Mental Incapacity

Slender build

LGBTI

Under developed

The process for conducting the initial screening is using the Form #10852-Intake-Classification Assessment Supplemental PREA Worksheet, which serves as the PREA objective screening instrument during intake to identify history of sexually assaultive behavior and potential vulnerabilities.

115.41(f): Policy 14.15 PREA mandates that each inmate identified as at-risk for sexual victimization or abusiveness will be reassessed for risk of sexual victimization or abusiveness based on any additional information received by the facility since the intake screening within 30 days from the inmate's arrival at the facility. Continual risk assessment for all inmates will be conducted upon each report, referral, and incident of abuse or receipt of additional information that may affect the inmate's risk of sexual victimization or abusiveness.

Agency indicates that there is a directive created by agency on 11/15/16 and provided to auditor. Directive mandates that classification unit is responsible for monitoring and reviewing inmate files in accordance with PREA requirements. The directive mandates include the PREA requirement for reassessment of all inmates within 30-days of intake and addresses the required twice annual reassessment of transgender inmates. Auditor has not been provided said directive.

Review of a random sample of 24 inmate screening records indicate that 1 inmate was reassessed 14 months after initial admission date and there is no record of another inmate ever receiving their reassessment.

Interview with Risk Screening staff indicates that all inmates are reassessed within 30 days of intake. Random selection of 24 inmates were interviewed. None can recall being reassessed within 30 days of intake.

115.41(g): Policy 14.15 PREA mandates that each inmate identified as at-risk for sexual victimization or abusiveness will be reassessed for risk of sexual victimization or abusiveness based on any additional information received by the facility since the intake screening within 30 days from the inmate's arrival at the facility. Continual risk assessment for all inmates will be conducted upon each report, referral, and incident of abuse or receipt of additional information that may affect the inmate's risk of sexual victimization or abusiveness.

Interview with Risk Screening staff indicates that if agency perceives that inmate is at risk, screening staff looks for safe housing accommodations. Random selection of 24 inmates were interviewed. None can recall being reassessed within 30 days of intake.

115.41(h): Policy 14.15 PREA mandates that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked regarding sexual victimization or abusiveness.

Interview with Risk Screening staff verifies that inmates are not disciplined in any way for refusing to respond to (or for not disclosing complete information related to) risk screening questions.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.41(f). Corrective action is required.

Corrective Action Recommended:

115.41(f)-1: Agency to provide auditor with directive which mandates inmates reassessed within 30 days and transgender reassessed twice annually

115.41(f)-2: Agency to obtain the names of both identified inmates and provide auditor justification as to how these errors occurred.

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20

CORRECTIVE ACTION COMPLETION 8/6/19 :

115.41(f)-1: On 8/7/19, Agency provided auditor with the 7/25/19 Reminder Classification Directive regarding PREA addressed to all Classification Staff. The directive provides the following narrative:

Each inmate's file will be reviewed within their first 30 days in custody and then again at their 60-day review. Inmates, who identify as Trans gender, will have their file reviewed a total of (3) times within the initial 12 months of incarceration, with the first review being a maximum of 30 days from their 1st day in custody. Transgender inmates have been identified as being at a higher risk for victimization and will require additional reviews throughout the year.

During the initial risk desk assessment, if a Transgender inmate is identified, a new purple sticker will be placed on the side and top of the Classification Jacket. This will ensure proper identification for PREA review purposes.

This directive has been put into place pending amendment approval for Policy 14.15 PREA.

115.41(f)-2: Response from Agency following their review of inmate documentation indicates that new comprehensive education for one inmate was acknowledged on 08/05/19 and provided to auditor. Inmate was in custody before the 2018 transition into the JFA tool. The other identified Inmate data who was in custody prior to the implementation date (2016), IT was unable to add to the system. Agency currently has Non=JFA and JFA under reviews due to this error. When PREA review was implemented in 2017, a spreadsheet was created for all non-JFA inmates prior to housing in 2018. Staff used the spreadsheet to ensure every inmate was PREA interviewed. Most of them were completed in February/March 2018.

The agency/facility has met the requirements of Standard provision(s) 115.41(f) completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.41.

115.42	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.42(a): Policy 14.15 PREA mandates that all inmates shall be assessed during an intake screening, Classification interview and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive towards other inmates. Information from the risk screening will be used to separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Interview with PREA Compliance Manager and Risk Screening Staff indicate risk screening information is utilized for housing and programming assignments.</p> <p>115.42(b): Policy 14.15 PREA mandates that risk assessments shall be objective and consider, at a minimum, the criteria outlined in the risk assessment to assess inmates for risk of sexual victimization. Interview with Risk Screening staff indicates that the agency uses the information from the risk screening during intake to determine housing assignment and victim potential.</p> <p>115.42(c): Policy 14.15 PREA mandates that to ensure proper housing for LGBTI inmates, decisions will be based on a case-by-case evaluation and will consider the risk to the inmate's health and safety, and whether the placement would present a management or security problem.</p> <p>Policy 14.17 LGBTQI Inmates mandates that housing and programming assignments for transgender or intersex inmates shall be made on an individualized basis and after considering the following criteria:</p> <ol style="list-style-type: none"> <li>1. The inmate's stated preference. In particular, the inmate's own views with respect to her or his own safety shall be given serious consideration.</li> <li>2. Any relevant medical and/or mental health considerations.</li> <li>3. Any management and/or security considerations.</li> </ol> <p>Interview with the PREA Compliance Manager indicates that Transgender and Intersex housing and program assignments are determined based on victim potential and considerations whether the placement will ensure the inmate's health and safety are employed. Consideration as to whether placement would present management or security problems are paramount. Ensuring Transgender and Intersex inmates are housed in units where they will not be victimized. All Transgender inmates are housed in Protective Custody units.</p> <p>Interview with 3 Transgender inmates indicates that in intake, staff asked about their safety considerations. Inmate felt safe. One Transgender inmate let it be known that the staff obtained a Vietnamese interpreter for communication purposes. Each inmate indicated that the agency did not conduct a strip-search of their person.</p> <p>115.42(d): Policy 14.15 PREA mandates that placement and programming assignments for each transgender and intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate.</p> <p>Interview with PREA Compliance Manager indicates Transgender and Intersex inmates are reassessed at least twice a year to review any threats to safety experience by the inmate.</p>

Interview with Risk Screening staff indicates that placement and programming assignments for each transgender or intersex inmate is reassessed at least twice a year to review any threats to safety experienced by the inmate. Agency utilizes a day-shift tracking system for flagging reassessment periods.

Agency has not provided auditor with any documentation to verify transgender have been reassessed at least twice per year to review any threats to safety experienced by the inmate. Agency utilizes a day-shift tracking system for flagging reassessment periods.

115.42(e): Policy 14.15 PREA mandates that a transgender or intersex inmate's own views with respect to his or her own safety will be given serious consideration. Interview with PREA Compliance Manager, 3 Transgender inmates and Risk Screening Staff indicate a Transgender or Intersex inmate's own views with respect to his or her own safety shall be give serious consideration absent concerns over safety and security of the institution and the inmate.

115.42(f): Policy 14.15 PREA mandates that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Interview with PREA Compliance Manager and Risk Screening Staff indicate a Transgender or Intersex inmate has the opportunity to shower separately from other inmates. Auditor's observation of Elmwood Men's Facility verifies single showers with privacy doors available for that purpose. Showers are under direct supervision of staff. Interview with PREA Compliance Manager, 3 Transgender inmates and Risk Screening Staff indicate that transgender and intersex inmates have the opportunity to shower separately from other inmates.

115.42(g): Policy 14.15 PREA incorporates language from Standard provision 115.42(g) and is deemed compliant with this Standard provision. Agency does not place members of the LGBTI community in dedicated facilities. Interview with PREA Compliance Manager and PREA Coordinator indicate there are not dedicated housing units for LGBTI inmate placement.

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.42(d). Corrective action is required.

Corrective Action Recommended:

115.42(d): Agency to provide auditor with reassessment notes for all Transgender inmates assigned to the Elmwood facility between 6 to 12 months since intake to verify they have received reassessment of programming assignments in compliance with this standard.

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20.

Corrective Action Completion 8/6/19:

115.42(d): On 8/6/19, agency provided auditor with 4 transgender inmates who have been in custody at Elmwood Men's Facility for over 6 months. Review of PREA notes provided by agency, each inmate received 60-day reassessment screening to assess victimization. Agency has met this PREA Standard provision.

The agency/facility has met the requirements of Standard provision(s) 115.42(d) completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.42.

<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.43(a): Policy 14.15 PREA mandates that inmates placed in segregated housing for purposes of separation from likely abusers shall have access to programs, privileges, education and work opportunities to the extent possible. Agency reports there have been no inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. Interview with the Facility Commander indicates that Elmwood does not possess segregated, administrative or protective housing.</p> <p>115.43(b): Policy PREA 14.15 mandates that inmates placed in segregated housing for purposes of separation from likely abusers shall have access to programs, privileges, education and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education and work opportunities, the facility shall document:</p> <ul style="list-style-type: none"> <li>a) The opportunities that have been limited</li> <li>b) The duration of the limitation</li> <li>c) The reasons for such limitations.</li> </ul> <p>Elmwood Mens facility does not possess segregated housing, therefore, no segregated housing staff or inmates were interviewed.</p> <p>115.43(d): Policy PREA 14.15 mandates that information from the initial Classification risk assessment screening shall be used to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Agency indicates that in the past 12 months, no inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement. Interview with the Facility Commander indicates that Elmwood does not possess segregated, administrative or protective housing. The housing unit classifications are at the Main Jail and inmates may be transferred to that facility for their safety.</p> <p>115.43(d): No record of any inmate being held in the past 12 months at the Elmwood Mens facility for risk of victimization.</p>

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51(a): Policy 14.15 provides multiple internal ways for inmates to privately report sex abuse, sex harassment or retaliation by other inmates or staff via confidential letter to the Sheriff, Undersheriff, Facility Captain or Internal Affairs Unit. Contact information is provided to inmates through the inmate handbook and the Sexual Assault Awareness Pamphlet. Interview with random sample of 14 staff indicate inmates are provided multiple internal ways to privately report sexual abuse/harassment and retaliation through 3rd party, grievance process, and Internal Affairs. Interview with 29 randomly selected inmates indicate they can report through 3rd party, emergency call button in cell, contact staff, Medical staff and Rape Crisis Hotline.</p> <p>115.51(b): Policy 14.15 PREA provides several methods for inmates to report abuse or harassment to a public or private entity that is not part of the Agency through contact with YWCA confidential non-monitored phone contact, Santa Clara County Human Relations Office, Department of Homeland Security. This information is on posters mounted in all housing units and areas available to both inmates and staff. Agency also posted contact numbers for outside agencies on metal beams over each row of phones at the Ranch. Contact information is in both English &amp; Spanish. Santa Clara County is a Safe Haven County &amp; prohibited from housing inmates detained solely for civil immigration purposes, however, policy provides for immigrants held on local or federal charges to contact the Relevant Consulate. Interview with PREA Compliance Manager and Random Sample of 29 Inmates indicate inmates can report through Rape Crisis Hotline, Chaplin, Medical &amp; Mental Health Staff and Internal Affairs. Staff also indicate they provide immigrant inmates held on local charges contact information for Relevant Consulate officials upon request.</p> <p>115.51(c): Policy 14.15 PREA mandates staff to accept reports made verbally, in writing, anonymously &amp; from 3rd parties &amp; promptly document any verbal reports. Interview with random sample of 29 inmates and 14 staff indicate reports can be made in person, verbally, in writing and through 3rd party. Staff indicate they immediately document all verbal reports.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.51.</p>

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.52(a): Policy 14.15 PREA indicates Agency is not exempt from this Standard provision. Agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse.</p> <p>115.52(b): Policy 14.15 PREA prohibits imposition of a time limit on when an inmate submits a grievance regarding an allegation of sexual abuse. Inmates are not required to use an informal grievance process or otherwise attempt to resolve with staff any alleged incident of sexual abuse. Inmate Handbook (Revised June 2011) states “Grievances concerning any allegations of sexual harassment, sexual abuse or sexual misconduct by staff or inmates will also be considered a priority as well. If you are alleging sexual harassment, sexual abuse or sexual misconduct by staff or another inmate, you do not have to use any informal grievance process to voice your concerns. You may go straight to the formal grievance process. There will be no time limitations imposed on when you can submit a grievance concerning sexual harassment, sexual abuse or sexual misconduct.” During On-Site facility review, Auditor observed locked Grievance boxes throughout the facility and located in every housing unit at the Elmwood Men’s facility and key locations at the Ranch facility. Interview with upper-level staff, custody staff and inmates all indicate Grievances are picked up by Shift Sergeants at least once per shift.</p> <p>115.52(c): Policy 14.15 PREA prohibits inmates submitting grievance of sexual abuse from having to submit said grievance to a staff member who is the subject of the complaint &amp; such grievance will not be referred to the staff member who is the subject of the complaint. Inmate handbook informs inmates of the updated PREA related grievance procedures on page #9. Handbook includes narrative which states inmates are not required to use the informal process for PREA related grievances and no time limit to submit PREA related grievances. Emergency grievances are handled as a priority. agency has installed locked grievance boxes in all housing units and along the hallways of the south segregated housing unit for inmates to anonymously submit grievances. Only the shift sergeants have access to the locked boxes and review grievances on each shift to refer to proper authorities for resolution. During the onsite audit, the grievance box in the camp was found to be damaged as if someone attempted to pry the lock-box door open. The agency was alerted and repaired the lock-box immediately.</p> <p>115.52(d): Policy 14.15 PREA complies with Standard provision 115.52(d) and provides for Agency issuing grievance decision in accordance with the Standard provision. In the past 12 months, a total of 15 grievances were filed that alleged sexual abuse. 4 grievances have been responded to the inmate within 2 - 5 days of receipt and were referred to Internal Affairs (IA), as the claims refer to staff sexual misconduct. Agency alleges response was provided within 70 days as verified by documentation provided to the auditor. Auditor reviewed all 15 PREA related grievances from the Elmwood Men’s Facility. Majority of all grievances had initial response within 3 days and issues were resolved in writing within 7 days.</p> <p>115.52(e): Agency indicates that 3rd party reports or declination of 3rd party assistance</p>

information. Policy 14.15 PREA mandates that should a third party file 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. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

115.52(f): Policy 14.15 PREA mandates that after staff receives an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. In the past 12 months, there have been no substantial risk of imminent sexual abuse grievances filed.

Recommendation: Related to the grievance box located outside of window "A" which is utilized for both inmate grievances and PREA concerns. Grievance/PREA box was locked with a padlock; however, it had been pried open allowing this auditor to read the grievance that had been placed into the box, reflecting all inmate identifiers, including inmate concern, which was not a PREA item. Box needs to be secured in a way to prevent vandalism. Agency was made aware of this issue during the onsite audit.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.52.

115.53	<p data-bbox="245 91 1098 129"><b>Inmate access to outside confidential support services</b></p> <p data-bbox="245 168 895 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="245 246 523 282"><b>Auditor Discussion</b></p> <p data-bbox="245 324 1481 913">115.53(a): Policy 14.15 PREA mandates that inmates shall have access to outside victim advocates for emotional support services related to sexual abuse by the Department giving the addresses and telephone numbers of such agencies, including toll-free hotline numbers to victim advocacy or rape crisis organizations. Inmates must be informed, 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. Inmates are provided access to outside victim advocates for emotional support services via I/M Sex Assault Pamphlet in 3 languages &amp; I/M Handbook. Inmates are not held solely for civil immigration per County Policy. Interview with random sample of inmates &amp; inmate who reported sexual abuse indicate access is provided to outside victim advocates through toll free number identified on wall of housing unit near phones to YWCA Rape Crisis. The poster information indicates that the speed-dial number for YWCA Rape Crisis is not monitored or recorded. Auditor verified inmate statements during on-site physical plant review of each housing unit.</p> <p data-bbox="245 965 1481 1346">115.53(b): The poster information indicates that the speed-dial number for YWCA Rape Crisis is not monitored or recorded. Auditor verified inmate statements during on-site physical plant review of each housing unit. Policy 14.15 PREA mandates that inmates shall have access to outside victim advocates for emotional support services related to sexual abuse by the Department giving the addresses and telephone numbers of such agencies, including toll-free hotline numbers to victim advocacy or rape crisis organizations. Inmates must be informed, 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.</p> <p data-bbox="245 1397 1442 1473">Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.53.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.54(a): Policy 14.15 PREA mandates that the Department will maintain a process to receive third-party reports of sexual abuse and sexual harassment and shall publicly distribute information on how to report sexual abuse, sexual assault, sexual misconduct and sexual harassment on behalf of an inmate.</p> <p>Third-party complaints of sexual abuse, sexual assault, sexual harassment or sexual misconduct on behalf of an inmate may be reported by using the following methods:</p> <ol style="list-style-type: none"> <li>a. In-person at the Main Jail Complex</li> <li>b. In-person at the Elmwood Complex</li> <li>c. Writing a confidential letter to the Facility Captain of either Main Jail or Elmwood Complexes</li> <li>d. Writing a confidential letter to the Chief of Correction</li> <li>e. Contacting the Internal Affairs Unit and submitting a complaint.</li> </ol> <p>The agency or facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates in Vietnamese, Spanish and English.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.54.</p>

115.61	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>115.61(a): Policy 14.15 PREA requires staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual assault, sexual misconduct, retaliation or sexual harassment against inmates. This includes any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All incidents will be reported whether or not the incident occurred within a Santa Clara County Department of Correction facility or any other agency. . Interview with random sample of staff verifies their training &amp; education related to mandatory reporting per Policy. Agency provides each custody staff member with a PREA Quick Reference card to be carried on their person at all times during shift which provides 1st responder responsibilities in the event of an allegation of sexual abuse. During formal and informal interviews of staff, Auditor randomly requested to see the card. Each staff member proudly displayed the card from their pockets. Staff responded to the Auditor's 1st Responder questions without looking at the card, which verifies the custody 1st Responder protocol is institutionalized and Agency exceeded the requirements of Standard 115.61 to ensure Staff had all the tools necessary to respond to an allegation of sexual abuse/harassment or imminent sexual abuse allegation.</p> <p>115.61(b): Policy 14.15 PREA mandates staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary to report sexual abuse on need to know basis. Interview with random staff verifies their training &amp; education with regards to providing information related to a sex abuse report only to staff on a need to know basis.</p> <p>115.61(c): Policy 14.15 mandates medical and mental health practitioners to report sex abuse and inform inmates of practitioner's duty to report &amp; inform of limitations of confidentiality at the initiation of services. Interviews with Medical and Mental health staff indicates they are aware their duty to inform inmates of their limits of confidentiality and duty to report at the initiation of services. This training was initially provided during their certification education and again during their PREA training.</p> <p>Agency created and provided the santa clara valley health &amp; hospital system adult custody health services correction plan for the prea deficiencies. This plan, called the notice of privacy practices (npp), mandates medical and mental health practitioners to provide information regarding reporting obligations and confidentiality as part of receiving information about the notice of privacy practices at the intake/booking stage. A copy of this mandate will be posted on the wall in the booking and clinic areas. For reporting prior sexual victimization that did not occur in an institutional setting, medical and mental health practitioners will have the inmate sign a hippa compliant authorization form before incident is reported to custody bureau/sheriff's office. Inmate will sign the notice of privacy practices acknowledgement at booking. Attachment b of this mandate outlines the responsibility of medical and mental health practitioners to comply with standard provision 115.61(c).</p> <p>115.61(d): Interview with the Facility Commander and the PREA Coordinator indicate that if victim is under the age of 18 years, investigation is conducted as normal to include reporting to Child Protective Services and Advocacy for support services. Should the victim be a vulnerable adult, the investigation is conducted as normal to include reporting to the crisis unit</p>

and report to the Elder Abuse Registry, Vulnerable Adult Victims of Crime and Elder Abuse Registry.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.61.

115.62	Agency protection duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.62(a): Policy 14.15 mandates staff to immediately report any knowledge that an inmate is subject to substantial risk of imminent sexual abuse. The Agency shall take immediate action to protect the inmate. Agency reports no inmate was subject to substantial risk of imminent sexual abuse over the past 12 months. Interview with Undersheriff, Facility Captain &amp; random sample of staff verifies the staff training and education in compliance with Standard provision 115.62(a). All staff interviewed indicated they would immediately separate victim from alleged abuser, contact Supervisor &amp; conduct written documentation to request Classification rehouse either the victim or alleged abuser.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.62.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.63(a): Policy 14.15 PREA mandates that all staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual assault, sexual misconduct or sexual harassment against inmates. All incidents will be reported whether or not the incident occurred within a Santa Clara County Department of Correction facility or any other agency. Sergeants are responsible, upon receiving an allegation that an inmate was sexually abused, sexually assaulted or sexually harassed while confined at another facility, to notify the Captain in charge of the facility where the report was generated. The Facility Captain will notify the head of the facility or an appropriate person where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation and provide the reported information. The Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator. Agency reports that in the past 12 months, the facility did not receive any allegation that an inmate was abused while confined at another facility.</p> <p>115.63(b): Policy 14.15 PREA mandates that the Facility Captain will notify the head of the facility or an appropriate person where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation and provide the reported information.</p> <p>115.63(c): Policy 14.15 PREA mandates that The Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator.</p> <p>115.63(d): Policy 14.15 PREA mandates that upon receipt of allegations received from other facilities and agencies, the Jail Crimes Unit shall take the initial Incident report following the standard procedures for documenting sexual abuse, sexual assault, sexual misconduct or sexual harassment. Office of the Sheriff/Department of Correction will immediately respond to allegations, fully investigate reported in-custody incidents ( in our facilities as well as reported to the Department by another facility), pursue disciplinary action, and refer for criminal investigation and prosecution of those inmates who perpetrate sexual misconduct and threats of sexual assault or intimidation. Agency reports that no allegations of sexual abuse have been received from other facilities during the past 12 months. Interview with Undersheriff &amp; Facility Captain indicate Policy procedures are followed to the letter once an allegation of sexual abuse is received from another facility. Internal Affairs and Jail Criminal Investigators are promptly notified and investigation is conducted immediately. Interview with Undersheriff &amp; Facility Captain indicate Policy procedures are followed to the letter once an allegation of sexual abuse is received from another facility. Internal Affairs and Jail Criminal Investigators are promptly notified and investigation is conducted immediately.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.63.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>115.64(a): Policy 14.15 PREA mandates upon learning of an allegation that an inmate was sexually abused, deputies/officers shall be required to immediately notify the on-duty Supervisor, separate the alleged victim and abuser; identify and separate any witnesses; preserve and protect any crime scene until steps can be taken to collect all evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, 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. Agency reports there have been 29 allegations that an inmate was abused over the past 12 months. 1st security staff member to respond to the report separated the alleged victim &amp; abuser during 13 incidents. All of the 13 incidents, staff were notified within a time period that still allowed for the collection of physical evidence. There was 1 incident, which allowed for protecting the crime scene, ensured victim and abuser did not take actions to destroy evidence. Agency provides each custody staff member with a PREA Quick Reference card to be carried on their person at all times during shift which provides 1st responder responsibilities in the event of an allegation of sexual abuse. During formal and informal interviews of staff, Auditor randomly requested to see the card. Each staff member proudly displayed the card from their pockets. Staff responded to the Auditor's 1st Responder questions without looking at the card, which verifies the custody 1st Responder protocol is institutionalized and Agency exceeded the requirements of Standard 115.61 to ensure Staff had all the tools necessary to respond to an allegation of sexual abuse/harassment or imminent sexual abuse allegation.</p> <p>115.64(b): Policy 14.15 PREA mandates that upon learning of an allegation that an inmate was sexually abused, non-badge staff shall be required request victim not take any action to destroy physical evidence and immediately notify a duty officer or Sergeant, who will respond and take appropriate action. Over the past 12 months there have been no instances where a non-security member was the first responder. In all 5 cases, non-security staff notified security staff, none requested the alleged victim not take any actions that could destroy evidence. Interview with random sample of staff responses verifies compliance with Standard provision 115.64(b).</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.64.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.65(a): Policy 14.15 mandates that the Elmwood Facility will ensure a coordinated response between staff first responders, medical and mental health practitioners, investigators, supervisors and managers, to all incidents of sexual abuse, sexual assault and/or sexual harassment.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.65.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.66(a): Agency entered into renewed collective bargaining agreement with the Correctional Peace Officer Association (2/1/16 - 8/23/2020) and Deputy Sheriff's Association (9/13/15 - extended through 9/6/2020). Upon review of both agreements, auditor determines there is no narrative within the agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.66.</p>

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.67(a): Policy 14.15 PREA mandates all incidents of sexual abuse, sexual harassment and retaliation shall be reported to the PREA Coordinator. Agency provided auditor with the name, title and department of staff member who monitors for possible retaliation. Inmates who are victims, or at risk of being a victim, of retaliation will be protected by employing measures such as housing changes, facility transfers for any victims or abusers and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse, sexual assault, sexual misconduct or sexual harassment or for cooperating with an investigation.</p> <p>115.67(b): Policy 14.15 PREA mandates that all reports of retaliation against those who have reported sexual abuse, sexual assault, sexual misconduct or sexual harassment or have cooperated with resulting investigations shall be investigated immediately, and if warranted, forwarded to the JCI Unit and/or Internal Affairs Unit for a thorough investigation. The PREA Coordinator will also be notified for the purposes of record keeping. Inmates who are the victim of retaliation or fear retaliation for reporting sexual abuse, sexual assault, sexual misconduct or sexual harassment or for cooperating with resulting investigations shall be provided emotional support by being referred to Mental Health. Staff who are the victims of retaliation or fear retaliation for reporting sexual abuse, sexual assault, sexual misconduct or sexual harassment or for cooperating with resulting investigations shall be provided emotional support by being referred to Employee Assistance Services. Interviews with Undersheriff, Facility Captain, PREA Coordinator &amp; inmate who reported a sexual abuse all verify Agency's protection measures for inmates and staff who fear retaliation. Both inmates and staff are monitored. Inmates can contact the Jail Observer program or the County Human Relations Council if they choose to seek monitoring outside of Agency. Additional referral measures provided for inmates inside the Agency is provided through the PREA video, posters inside facility, mental health practitioners, chaplaincy and through the grievance process. Staff are referred to the Employee Assistance Program (EAP) per union contract. Agency is kept apprised of any ongoing retaliation.</p> <p>115.67(c): Policy 14.15 PREA mandates that following the report of sexual abuse, Classification Unit and Mental health will monitor the conduct of inmates of sexual abuse for at least 90 days &amp; continue to monitor beyond 90 days if the initial monitoring indicates the continued need. Agency provided 15 documented face to face followup monitoring instances for inmates who had previously made allegations of sexual abuse, to verify Agency's compliance with Standard 115.67. Interview with Facility Captain indicate any allegation of retaliation is investigated immediately through Internal Affairs &amp; Jail investigative division. PREA Compliance manager indicates he documents monitoring efforts. Over the past 12 months there have been no incidents of retaliation.</p> <p>115.67(d): Policy 14.15 PREA mandates that monitoring shall also include periodic status checks. Interview with staff member charged with retaliation monitoring indicates the periodic status checks are conducted are through complaints review and observations of staff and Facility PREA Compliance Managers.</p>

115.67(e): Policy 14.15 PREA mandates that inmates who are victims, or at risk of being a victim, of retaliation will be protected by employing measures such as housing changes, facility transfers for any victims or abusers and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse, sexual assault, sexual misconduct or sexual harassment or for cooperating with an investigation.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.67.

115.68	Post-allegation protective custody
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68(a): Policy 14.15 PREA mandates that inmates who are victims, or at risk of being a victim, of retaliation will be protected by employing measures such as housing changes, facility transfers for any victims or abusers and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse, sexual assault, sexual misconduct or sexual harassment or for cooperating with an investigation. Interview with Facility Commander indicates that Elmwood does not possess segregated, administrative or protective housing areas. Information is compiled prior to housing placement for inmates at high risk for victimization. We investigate first, prior to housing transfers.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.68.</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.71(a): Policy 14.15 PREA mandates that all investigations shall be done promptly thoroughly and objectively including anonymous and 3rd party reporting. Interview with Investigative Staff indicate sexual abuse investigations are initiated immediately upon notification to include 3rd party reports.</p> <p>115.71(b): Policy 14.15 PREA mandates that where sexual abuse is alleged, the investigation shall be conducted by Jail Crimes Unit (JCU) investigators that have received Special Training in Sexual Abuse Investigations in Confinement Settings. Agency has identified 10 sexual abuse investigators. Agency has identified 28 investigators that conduct sexual abuse investigations in a confinement setting. Agency has provided auditor with certificates of completion for all 28 special investigators of the NIC Investigation in Correctional Setting course. Interview with Investigative Staff indicate they receive specialized training through either POST or NIC to conduct Investigations in a Confinement Setting. The training includes Miranda, Garrity and Lybarger admonishments, interviewing techniques and evidence collection.</p> <p>115.71(c): Policy 14.15 PREA mandates that investigators shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. Interview with Investigative Staff indicate they employ the services of the Agency Crime Scene Investigation Unit to secure crime-scene evidence and Forensic Nurses from the hospital to obtain and secure forensic evidence. Investigators indicate that upon initiating an investigation, after responding to the scene, they meet with the reporting deputy, interview the victim and perpetrator, collect evidence, obtain witness statements, view any video and body worn camera recordings, write criminal report and forward to DA office. Anonymous 3rd party reports are investigated the same as 1st party reporting. Direct and circumstantial evidence can come as an eyewitness to to the event, and circumstantial evidence would be such as evidence left at the scene, body worn camera footage, SART/SANE/SAFE evidence collection.</p> <p>115.71(d): Policy 14.15 PREA mandates compelled interviews are conducted only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Interview with Investigative Staff indicate Criminal Investigative Unit does not conduct compelled interviews. Interview with Internal Affairs Unit indicate they conduct compelled interviews only with the approval of prosecutor.</p> <p>115.71(e): Policy 14.15 PREA mandates that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as staff or inmate. No inmate alleging sexual abuse shall be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with investigation of such an allegation. Interview with investigative staff indicates that credibility of an alleged victim, suspect or witness is judged upon the level of truthfulness, body language, camera footage and corroboration from other bodies of evidence. Polygraph examination or truth-telling devices as a condition for proceeding with an investigation is not required.</p>

115.71(f): Policy 14.15 PREA mandates that all administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and/or sexual harassment. Interview with Internal Affairs staff indicate all administrative investigations shall be documented in an Incident Report All reports are written and documented. Interview with Internal Affairs Investigative Staff indicate they review policies and procedures to determine if violation of either or both. Discipline or corrective action may be taken due to the violation. Investigations are documented in written reports and include any information gleaned from a documented Criminal Investigation, to include interviews, forensic examinations, additional reports from other investigations, policy violations, findings and physical evidence. administrative investigations shall be documented in an Incident Report that contains a thorough description of the physical, testimonial, documentary evidence , the reasoning behind the credibility assessments, and investigative facts and findings. Interview with investigative staff indicates that if the investigation is criminal in nature, administrative investigation is tolled pending completion of the criminal case. After the criminal investigators have completed their case, administrative investigators then review video, welfare check logs, records to determine if policy violation has been conducted and if needed, witness interviews. Information included in the administrative reports include all the investigative steps, summary of video , audio and written reports regarding policy violations.

115.71(g): Policy 14.15 PREA mandates that all criminal investigations shall be documented in a written report, containing a thorough description of the physical, testimonial, and documentary evidence. Documentary evidence will be attached to the report where feasible. All reports are documented providing for victim & suspect information, evidence collected, recordings of interviews, video/photo evidence, forensic evidence, witness statements, evaluation of date & findings. Interview with investigative staff indicates that criminal and administrative investigations are documented. The reports outline all statements collected, detailed reporting, biological information of all players involved, evidence collection and disposition of the findings.

115.71(h) Policy 14.15 PREA mandates that substantiated allegations of conduct that appear to be criminal shall be referred to the District Attorney's Office for prosecution. All reports are documented providing for victim & suspect information, evidence collected, recordings of interviews, video/photo evidence, forensic evidence, witness statements, evaluation of date & findings. Agency indicates 1 Agency-wide substantiated allegation of conduct that appear to be criminal was referred for prosecution since August 20, 2012. Interview with Investigative Staff indicate that if an investigator believes a crime has occurred, the case is forwarded to the DA. Auditor reviewed all 55 investigations from the Elmwood Men's Facility and 6 of them were considered to be criminal in nature and referred to the DA for prosecution. None of them were accepted by the DA for prosecution.

115.71(i): Policy 14.15 PREA mandates the Agency shall retain all written investigative reports for as long as the victim and the alleged abuser are incarcerated, +5 years. This policy is mandated for cases involving both inmate on inmate and staff on inmate.

115.71(j): Policy 14.15 PREA mandates the departure of the alleged abuser or victim from the employment or control of the department shall not provide a basis for terminating investigation. Interview with Investigative Staff indicate the departure of Staff, victim or inmate

perpetrator from the facility or Agency, does not provide a basis for terminating the investigation. The investigation continues to completion and referred to DA office for prosecution if sustained as a possible criminal matter.

115.71(k): N/A - Agency is County Department, not State entity or DOJ. Standard provision 115.71 is not applicable to this Agency/Facility.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.71.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72(a): Policy 14.15 mandates that agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interview with Investigative Staff indicate they impose no standard higher than preponderance of the evidence for sexual abuse/harassment cases.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.72.</p>

115.73	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.73(a): Policy 14.15 PREA mandates that following an inmate's allegation that he or she has been sexually abused, sexually harassed or sexually harassed by another inmate, the Department shall subsequently inform the alleged victim whether the allegation was determined to be substantiated, unsubstantiated or unfounded. Agency indicates that over the past 12 months 29 criminal/administrative investigations of alleged inmate sexual abuse were completed by Agency &amp; 5 were notified in writing with regards to the results of the investigations. Agency provided copies of the documented notifications that was part of the notification package. Interview with Facility Captain &amp; Investigative staff indicate the victim is notified of the outcome of the investigation to inform them of the findings. Majority of cases found written notations indicating that the inmate was released from custody prior to the closure of the case and disposition findings. Criminal investigators indicate Crimes Unit notifies the victim and Internal Affairs indicate they are legally mandated to provide the victim with disposition of any investigation in accordance with Penal Code section 832.5(c).</p> <p>115.73(b): N/A - Santa Clara County Sheriff's Department is responsible for conducting both administrative and criminal investigations.</p> <p>115.73(c): Policy 14.15 PREA mandates that following an inmate's allegation that a staff member has committed sexual abuse, sexual assault, sexual misconduct or sexual harassment against the inmate, the Department shall subsequently inform the inmate (unless the Department has determined that the allegation is unfounded) whenever:</p> <ol style="list-style-type: none"> <li>1. The staff member is no longer assigned to the inmate's unit;</li> <li>2. The staff member is no longer employed at the facility;</li> <li>3. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility;</li> <li>4. Or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.</li> </ol> <p>All such notifications shall be documented. There has been no substantiated or unsubstantiated complaint (i.e., not unfounded) of sexual abuse committed by a staff member against an inmate in an agency facility in the past 12 months.</p> <p>115.73(d): Policy 14.15 PREA mandates that following an inmate's allegation that he or she has been sexually abused, sexually harassed or sexually harassed by another inmate, the Department shall subsequently inform the alleged victim whether the allegation was determined to be substantiated, unsubstantiated or unfounded, and whenever:</p> <ol style="list-style-type: none"> <li>1. The alleged abuser has been indicted on a charge related to sexual abuse or sexual assault within the facility;</li> <li>2. The agency learns that the alleged abuser has been convicted of a charge related to sexual abuse or sexual assault.</li> </ol> <p>All such notifications or attempted notifications shall be documented.</p>

115.73(e): Policy 14.15 PREA mandates that all notifications to inmates shall be documented. In the past 12 months, the number of notifications to inmates provided under this standard was 5 and all were documented. Agency provided copies of the documented notifications. The attempted notifications were annotated in the case cover-sheets of the remaining 29 closed investigative cases when it was found that the inmate was released from custody prior to the completion of the investigation or date of investigative closure and findings.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.73.

115.76	Disciplinary sanctions for staff
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.76(a): Policy 14.15 PREA mandates that under staff sanctions, any discipline resulting from violations of the sexual abuse or sexual harassment policies shall be 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 histories.</p> <p>115.76(b): Policy 14.15 PREA mandates that under staff sanctions, any discipline resulting from violations of the sexual abuse or sexual harassment policies shall be 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 histories. In the past 12 months, no staff from the facility who have violated agency sexual abuse or sexual harassment policies.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.76.</p>

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.77(a): Policy 14.15 PREA mandates that any contractor or volunteer who engages in sexual victimization shall be prohibited from contact with inmates and shall be reported to the Jail Crimes Investigation Unit, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. In the past 12 months, a nurse contractor was reported to jail administration via grievance that a sexual abuse had occurred. The case was determined to be unfounded.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.77.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.78(a): Policy 14.15 PREA mandates that inmates who engaged in inmate-on-inmate sexual victimization or were found guilty of inmate-on-inmate sexual victimization shall be subject to disciplinary sanctions pursuant to a formal disciplinary process. In the past 12 months there were 26 administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. In the past 12 months, 1 criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility. Case was referred to the DA who declined to press charges. Victim was released 70 days prior to the case closure so no victim notification was sent.</p> <p>115.78(b): Policy 14.15 PREA mandates that sanctions shall be commensurate with the nature and circumstances of the victimization, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Interview with Facility Commander indicates that disciplinary sanctions may include criminal charges, increase classification to higher-custody, inmate may be moved to another location or face criminal charges.</p> <p>115.78(c): Policy 14.15 PREA mandates that the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior in determining what type of sanction, if any, should be imposed. Interview with Facility Commander indicates that disciplinary sanctions may include criminal charges, increase classification to higher-custody, inmate may be moved to another location or face criminal charges.</p> <p>115.78(d): Policy 14.15 PREA mandates that the disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior in determining what type of sanction, if any, should be imposed. If found guilty as a result of the inmate disciplinary process, the inmate may be required to participate in such interventions as a condition of access to programming or other benefits. Interview with Medical &amp; Mental Health Staff indicates that the facility offers therapy, counseling or intervention services to victims, not perpetrators. These services can be obtained by off-site practitioners if required. These services are not required as a condition of access to programming or other benefits.</p> <p>115.78(e): Policy 14.15 PREA mandates that inmate may be disciplined if found guilty of sexual victimization of a staff member. If available, therapy, counseling, or other interventions shall be designed to address and correct underlying reasons or motivations for the victimization. Consideration shall be given whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.</p> <p>115.78(f): Policy 14.15 PREA mandates that for the purpose of disciplinary action, a report of sexual victimization made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p>

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.78.

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.81(a): Policy 14.15 PREA mandates that if, during the intake screening process, it is determined that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, and the inmate remains in custody, Alameda County Health Systems (ACHS) Mental Health will conduct, within 14 days, a follow-up meeting with the inmate. In the past 12 months, agency reports that 100% of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner.</p> <p>Interview with 4 inmates who disclosed sexual victimization at risk screening indicates that when they disclosed sexual victimization at screening, they were referred to mental health same day and was seen. The inmates appeared impressed that the practitioners asked caring questions regarding their feelings and safety. Interview with Risk Screening staff indicates that they offer an inmate a followup meeting with a medical and mental health practitioner if the inmate indicates prior sexual victimization at screening.</p> <p>115.81(b): N/A - Facility is not a prison. Policy 14.15 PREA mandates that if during the intake screening process, it is determined that an inmate has previously perpetrated sexual victimization, whether it occurred in an institutional setting or in the community and the inmate remains in custody, ACHS Mental Health will conduct, within 14 days, a followup meeting with the inmate. In the past 12 months, agency indicates 0% of inmates who have previously perpetrated sexual abuse, as indicated during the screening, who were offered a follow-up meeting with a mental health practitioner. Interview with Risk Screening staff indicates that in the case as stipulated above, the staff members provide a mental health referral immediately.</p> <p>115.81(c): Policy 14.15 PREA mandates that if, during the intake screening process, it is determined that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, and the inmate remains in custody, Alameda County Health Systems (ACHS) Mental Health will conduct, within 14 days, a follow-up meeting with the inmate. n the past 12 months, agency reports that 100% of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner.</p> <p>Interview with 4 inmates who disclosed sexual victimization at risk screening indicates that when they disclosed sexual victimization at screening, they were referred to mental health same day and was seen. The inmates appeared impressed that the practitioners asked caring questions regarding their feelings and safety. Interview with Risk Screening staff indicates that they offer an inmate a followup meeting with a medical and mental health practitioner if the inmate indicates prior sexual victimization at screening.</p> <p>115.81(d): Policy 14.15 PREA mandates that any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform on treatment plans, security and management decisions including housing, bed, work, education and program assignments, or as otherwise required by federal, state or local law.</p>

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.81(a). Corrective action is required.

Corrective Action Recommended:

115.81(a): Agency to provide auditor with documented evidence of inmates over the past 12 months who disclosed victimization during screening. Documentation must include inmate name, intake date and date inmate was seen by mental health practitioner. Agency to also include list of inmates who was declined to see mental health practitioner when offered.

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20

Corrective Action Completion 9/26/19:

On 9/25/19, the PREA Manager provided auditor with a copy of the 2019 Previously Disclosed Victimization at intake form which has been completed by Mental Health. The form included 35 inmates who were identified as alleging previous sexual abuse victimization at intake. Review of the inmate entries indicated that 1 inmate was referred to MH by intake but not seen.

Conference call with MH and PREA Manager indicated the entry was in error as the inmate experienced sexual harassment during an in-custody event in the booking area. Jail Crimes investigated the case and there was no previous victimization, no referral to MH.

2nd inmate was found to be referred to MH for prior sexual victimization via scan from Booking. MH indicate they did not receive the scanned referral from booking as there is no record of receiving it. MH will follow-up with documentation issues to ensure this does not occur again.

3rd inmate was identified as answering YES on the booking sheet to indicate experienced prior victimization, but refused to discuss the issue. Jail Crimes met with him and he was pending Mental Health review. Inmate was cited out within 3 hours of intake. The remainder of the inmates were seen by a mental health practitioner within 1 day of intake. All information was cross-referenced between Mental Health database and the Booking/Intake database.

The agency/facility has met the requirements of Standard provision(s) 115.81(a), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.81.

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.82(a): Policy 14.15 PREA mandates that Alameda County Health Systems (ACHS) shall offer medical and mental health evaluations and timely, unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting. The care provided will be consistent with the community level of care. Interview with medical, mental health and inmates who reported sexual abuse verify practice of Policy mandates.</p> <p>115.82(b): Interview with security and non-security staff 1st responders indicate that medical and mental health staff are available in the facility 24/7 and are notified to respond to any sexual abuse case. Review of the sexual abuse investigations indicate medical staff is available during all shifts.</p> <p>115.82(c): Policy 14.15 PREA mandates that ACHS shall offer medical and mental health evaluations and timely, unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting. The care provided will be consistent with the community level of care. Interview with medical and mental health staff including inmates who reported sexual abuse corroborate the mandate of Policy 14.15 PREA. Note: Female inmates are housed in the Elmwood Men's Facility clinic.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.83(a): Policy 14.15 PREA mandates that Alameda County Health Systems (ACHS) shall offer medical and mental health evaluations and timely, unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting. The care provided will be consistent with the community level of care.</p> <p>115.83(b): Interview with medical and mental health staff indicates that evaluation assessments and treatment are provided to inmates who have been victimized. This includes the offer of ongoing services and followup referrals when released to the community. Interview with inmates who reported sexual abuse concur with this statement.</p> <p>115.83(c): Policy 14.15 PREA mandates that ACHS shall offer medical and mental health evaluations and timely, unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting. The care provided will be consistent with the community level of care. Interview with medical and mental health staff concurs with Policy statement.</p> <p>115.83(d): Policy 14.15 PREA mandates that inmate victims of sexual abuse by vaginal penetration while incarcerated shall be offered a pregnancy test. The only female inmates at the facility are housed at the medical clinic. Female inmates housed at the clinic during the onsite review had mp record of sexual victimization at the facility.</p> <p>115.83(e): Policy 14.15 PREA mandates that if pregnancy results from sexual abuse by vaginal penetration while incarcerated, such victims shall receive timely and comprehensive information about, and have timely access to, all lawful pregnancy-related medical services. Medical and mental health staff concur with the Policy language. Female inmates housed at the clinic during the onsite review had mp record of sexual victimization at the facility.</p> <p>115.83(f): Policy 14.15 PREA mandates that inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Interview with inmate who reported sexual abuse indicate that he was offered STD testing, however he declined.</p> <p>115.83(g): Policy 14.15 PREA mandates that treatment services shall be provided without financial cost to the victim inmate regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Interview with inmates who reported sexual abuse indicate that he was not charged for the treatment services.</p>

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1477 528">115.86(a): Policy 14.15 PREA mandates that sexual abuse incident review shall be conducted at the conclusion of every sexual abuse investigation. The review will be conducted on all founded, substantiated and not substantiated case determinations. Reviews will not be conducted on cases with unfounded determinations. Such review shall be conducted within 30 days of the conclusion of the investigation.</p> <p data-bbox="252 539 970 573">The sexual abuse incident review team shall consist of:</p> <ul data-bbox="252 584 1184 831" style="list-style-type: none"> <li data-bbox="252 584 488 618">i. Assistant Sheriff</li> <li data-bbox="252 629 906 663">ii. PREA Coordinator/Custody Compliance Captain</li> <li data-bbox="252 674 625 707">iii. Internal Affairs Lieutenant</li> <li data-bbox="252 719 491 752">iv. PREA Manager</li> <li data-bbox="252 763 1098 797">v. Medical staff representative (when applicable and appropriate)</li> <li data-bbox="252 808 1184 842">vi. Mental Health staff representative (when applicable and appropriate)</li> </ul> <p data-bbox="252 887 1465 999">In the past 12 months, 8 criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents occurred. Agency provided auditor with copies of all 8 investigations for review.</p> <p data-bbox="252 1055 1477 1424">115.86(b): Policy 14.15 PREA mandates that a sexual abuse incident review shall be conducted at the conclusion of every sexual abuse investigation. The review will be conducted on all founded, substantiated and not substantiated case determinations. Reviews will not be conducted on cases with unfounded determinations. Such review shall be conducted within 30 days of the conclusion of the investigation. The 3.22.19 IRB Action Plan Summary.pdf verifies compliance of the date in which the Incident Review review occurred. Agency reports that in the past 12 months, no criminal and/or administrative investigations of alleged sexual abuse completed at the facility were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents.</p> <p data-bbox="252 1480 1414 1559">115.86(c): Policy 14.15 PREA mandates thatThe sexual abuse incident review team shall consist of:</p> <ul data-bbox="252 1570 1184 1816" style="list-style-type: none"> <li data-bbox="252 1570 488 1603">i. Assistant Sheriff</li> <li data-bbox="252 1615 906 1648">ii. PREA Coordinator/Custody Compliance Captain</li> <li data-bbox="252 1659 625 1693">iii. Internal Affairs Lieutenant</li> <li data-bbox="252 1704 491 1738">iv. PREA Manager</li> <li data-bbox="252 1749 1098 1783">v. Medical staff representative (when applicable and appropriate)</li> <li data-bbox="252 1794 1184 1827">vi. Mental Health staff representative (when applicable and appropriate)</li> </ul> <p data-bbox="252 1872 1359 1939">Auditor found each case to be compliant with this standard as the Action Plan Review Summary identifies Incident Review Team members.</p> <p data-bbox="252 1995 1455 2152">115.86(d): Policy 14.15 PREA mandates that upon conclusion of the sexual abuse incident review, the PREA Coordinator shall prepare a report of findings and recommendations and submit the report to the Undersheriff. The Facility Captain in charge of the facility where the incident occurred shall implement the recommendations for improvement, or shall document</p>

the reasons for not doing so. Review of the 3/22/19 IRB Action Plan Summary meets this requirement.

Interview with the Facility Commander, PREA Compliance Manager and Incident Review Team member indicates that the Incident Review Team considers the criteria outlined in standard provision 115.86(d), which include reviewing the area where the incident occurred, whether physical barriers in the area may have enabled abuse, access to adequate staffing in the area where the incident occurs during different shifts and assessment of monitoring technology to determine if said technology should be deployed or augmented to supplement supervision by staff.

Incident review information is utilized to update or correct issues identified in the investigation of a sexual misconduct event.

115.87	<b>Data collection</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1445 445">115.87(a): Policy 14.15 PREA mandates that the Department shall collect accurate, uniform data for every allegation of sexual victimization in facilities under its' direct control using a standard instrument and set of definitions.</p> <p data-bbox="252 499 1445 573">115.87(b): Policy 14.15 PREA mandates that the agency shall aggregate the incident-based sexual abuse data at least annually.</p> <p data-bbox="252 627 1477 831">115.87(c): Policy 14.15 PREA mandates that incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30th of each year.</p> <p data-bbox="252 884 1445 1003">115.87(d): Policy 14.15 PREA mandates that the agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="252 1057 1445 1220">115.87(e): Policy 14.15 PREA mandates that the agency shall aggregate the incident-based sexual abuse data at least annually. 1. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p data-bbox="252 1274 1477 1393">115.87(f): Agency reports that the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request. Agency to provide auditor with data from the previous calendar year which was provided to the DOJ.</p> <p data-bbox="252 1447 1430 1520">Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.87(f). Corrective action is required.</p> <p data-bbox="252 1574 692 1608">Corrective Action Recommended:</p> <p data-bbox="252 1617 1414 1691">115.87(f): Agency to provide auditor with data from the previous calendar year which was provided to the DOJ.</p> <p data-bbox="252 1744 1477 1863">Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20.</p> <p data-bbox="252 1917 746 1951">Corrective Action Completion 9/25/19:</p> <p data-bbox="252 1960 1422 2033">On 9/25/19, the PREA Manager provided auditor with a copy of the DOJ Survey of Sexual Victimization 2017 form. Agency is currently working on the 2018 DOJ SSV for 2018.</p> <p data-bbox="252 2087 1445 2161">The agency/facility has met the requirements of Standard provision(s) 115.87(f), completed during the corrective action period. The auditor has determined that the agency/facility has</p>

met all standard provisions and complies with Standard 115.87.

<b>115.88</b>	<b>Data review for corrective action</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1484 450">115.88(a): Policy 14.15 PREA mandates that PREA data will be collected from all department facilities and aggregated in order to assess and improve the effectiveness of the sexual victimization prevention, detection, and response policies, practices, and training, by including:</p> <ol data-bbox="252 456 1484 613" style="list-style-type: none"> <li>1. Identifying problem areas</li> <li>2. Taking corrective action on an ongoing basis</li> <li>3. Preparing any of its findings and corrective actions for each facility, as well as the agency as a whole.</li> </ol> <p data-bbox="252 627 1469 1128">Interview with Agency Head designee indicates that based upon statistics and aggregated data, instances are restricted to determine deficiencies for making changes to address the situation such as lack of staff, lack of supervision. Interview with PREA Coordinator and PREA Compliance Manager indicates that issues identified by the Incident Review Board data, we fix. Every situation is different. The IRB meetings are crucial for corrective action repairs. The agency review data is collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies and training. Collected data is securely retained by the PREA Manager. Agency takes corrective action on an ongoing basis, always changing if required. If corrective action is needed, we take action. An Annual Report of findings from this data review and any corrective actions for each facility is prepared. Agency provided auditor with a copy of the Annual Report and was found to be compliant with Standard 115.88.</p> <p data-bbox="252 1182 1477 1305">115.88(b): Policy 14.15 PREA mandates that PREA data reports shall include a comparison of the current year's data and the corrective actions taken as a result of prior years and shall provide an assessment of the agency's progress in addressing sexual victimization.</p> <p data-bbox="252 1359 1469 1559">115.88(c): Policy 14.15 PREA mandates that the agency makes its annual report readily available to the public at least annually. The 2018 Annual Report can be found on the agency website at: <a href="https://www.sccgov.org/sites/sheriff/jail-reforms/Pages/reforms.aspx">https://www.sccgov.org/sites/sheriff/jail-reforms/Pages/reforms.aspx</a>. Interview with the Agency Head designee verifies that the Annual Report is approved by the Agency Head before it is made available to the public by placing it on the Agency website.</p> <p data-bbox="252 1612 1477 1946">115.88(d): Policy 14.15 PREA mandates that all sexual victimization data required to be made available to the public shall be collected from all facilities and made available to the public at least annually through the department's website. All personal identifiers will be removed from all sexual victimization data made available to the public. Interview with the PREA Coordinator indicates that all personal identifiers are not included in the Annual Report. The Annual Report as all data is aggregated. No Personal Identifying Information is provided. Upon review of the 2018 PREA Annual Statistical Report, auditor could not identify any verification that the agency informs the public that the nature of any redacted material.</p> <p data-bbox="252 2000 1430 2074">Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.88(d). Corrective action is required.</p> <p data-bbox="252 2128 692 2161">Corrective Action Recommended:</p>

115.88(d): Agency to update the 2018 PREA Annual Statistical Report to include narrative which informs the public as to the nature of any redacted material per standard provision 115.88(d).

Auditor will conduct a 90-day status review on 10/20/19 to determine if corrective actions have been implemented and are institutionalized. Corrective action recommendations must be implemented by the end of the 180-day Corrective Action Period: 1/18/20.

Corrective Action Completion 8/7/19:

115.88(d): On 8/7/19, Agency provided auditor with a link to the amended 2018 Annual Report located on the Sheriff's website, where the Introduction paragraph on page #2 provides a sentence which states, "Any personal identifiable information has been redacted for the safety of staff, inmates and the agency."

The agency/facility has met the requirements of Standard provision(s) 115.88(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and complies with Standard 115.88.

115.89	Data storage, publication, and destruction
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.89(a): Policy 14.15 PREA mandates that records and data will be collected, maintained and tracked either via the jail management system or manually. Interview with the PREA Coordinator indicates that the agency review data is securely maintained by the PREA Manager.</p> <p>115.89(b): Policy 14.15 PREA mandates that all sexual victimization data required to be made available to the public shall be collected from all facilities and made available to the public at least annually through the department's website. Access to the website is:  <a href="https://www.sccgov.org/sites/sheriff/jail-reforms/Pages/reforms.aspxr">https://www.sccgov.org/sites/sheriff/jail-reforms/Pages/reforms.aspxr</a> /&gt;</p> <p>115.89(c): Policy 14.15 PREA mandates that all personal identifiers will be removed from all sexual victimization data made available to the public. All data collected per PREA standards shall be securely retained for at least 10 years after the date of the initial collection. The 10-year retention period overrides the County-authorized Records Retention and Destruction Schedule, DOC Policy 1.61.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.401(a): Agency has had PREA audits conducted on each of their three facilities during this compliance cycle, SCCJ Main Facility, Elmwood Men's Facility and Elmwood Women's Facility.</p> <p>115.401(b): During each one-year period for this audit cycle, the agency ensured that at least 1/3 of each facility type operated by the agency was audited. Agency does not contract with outside agency for the confinement of its inmates.</p> <p>115.401(h): During the audit of the Elmwood Mens facility, the auditor had access to all areas of the facility including the Minimum area designated as the Camp. Auditor also reviewed all aspects of the grounds and buildings located outside the secure housing areas.</p> <p>115.401(i): Auditor requested and was provided access to obtain and recieve copies of all relevant documentation to determine PREA compliance.</p> <p>115.401(m): Auditor was permitted to conduct private interviews with inmates. The agency secured confidential settings for that purpose throughout the facility.</p> <p>115.401(n): Inmates were allowed to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. Auditor and agency agreed to this requirement via conference call during the initial meeting prior to the onsite audit.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.401.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.403(f): Final PREA reports dated 2015 to 2018 are published on the agency website for public access. This Interim Report is for the Elmwood Men's facility, the last and final facility to be audited during this cycle. All facilities have been audited since 2015. The Interim Report is not to be published on the Agency website.</p> <p>Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.403.</p>

## Appendix: Provision Findings

115.11 (a)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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)	<b>Contracting with other entities for the confinement of inmates</b>	
	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.)	na

<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure 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.)	na

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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 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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	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

<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na

<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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 facility does not have female inmates.)	yes

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)?	yes

115.15 (d)	<b>Limits to cross-gender viewing and searches</b>	
	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

115.15 (e)	<b>Limits to cross-gender viewing and searches</b>	
	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)	<b>Limits to cross-gender viewing and searches</b>	
	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)	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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 with inmates with disabilities including inmates who: Have intellectual disabilities?	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: 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)	<b>Hiring and promotion decisions</b>	
	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 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
	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)	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone 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

<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	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

<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	<b>Employee training</b>	
	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)	<b>Employee training</b>	
	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)	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	<b>Volunteer and contractor training</b>	
	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)	<b>Volunteer and contractor training</b>	
	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

<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a)</b>	<b>Inmate education</b>	
	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

<b>115.33 (b)</b>	<b>Inmate education</b>	
	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

<b>115.33 (c)</b>	<b>Inmate education</b>	
	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)	<b>Inmate education</b>	
	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)	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	<b>Inmate education</b>	
	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)	<b>Specialized training: Investigations</b>	
	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)	<b>Specialized training: Investigations</b>	
	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 Garrity warnings? (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 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)	<b>Specialized training: Investigations</b>	
	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)	<b>Specialized training: Medical and mental health care</b>	
	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 suspicions 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

115.35 (b)	<b>Specialized training: Medical and mental health care</b>	
	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)	<b>Specialized training: Medical and mental health care</b>	
	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)	<b>Specialized training: Medical and mental health care</b>	
	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)	<b>Screening for risk of victimization and abusiveness</b>	
	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)	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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) Whether the inmate is detained solely for civil immigration purposes?	no

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

<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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 information is not exploited to the inmate's detriment by staff or other inmates?	yes

<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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

<b>115.42 (b)</b>	<b>Use of screening information</b>	
	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 present management or security problems?	yes

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 solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

115.52 (b)	<b>Exhaustion of administrative remedies</b>	
	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)	<b>Exhaustion of administrative remedies</b>	
	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 this standard.)	yes
	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)	<b>Exhaustion of administrative remedies</b>	
	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)	<b>Inmate access to outside confidential support services</b>	
	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, 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.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	<b>Inmate access to outside confidential support services</b>	
	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)	<b>Inmate access to outside confidential support services</b>	
	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)	<b>Third-party reporting</b>	
	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 abuse or sexual harassment or retaliation?	yes

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

<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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

<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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

<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes

<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	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 response to an incident of sexual abuse?	yes

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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

<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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

<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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 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?	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 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

<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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

<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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

<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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).)	yes
	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

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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

<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	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 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?	yes

<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes

<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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

<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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)	<b>Corrective action for contractors and volunteers</b>	
	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)	<b>Corrective action for contractors and volunteers</b>	
	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)	<b>Disciplinary sanctions for inmates</b>	
	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)	<b>Disciplinary sanctions for inmates</b>	
	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)	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	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 evidence sufficient to substantiate the allegation?	yes

<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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

<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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?	yes

<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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?	yes

<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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

<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners 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?	yes

<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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)	<b>Access to emergency medical and mental health services</b>	
	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)	<b>Access to emergency medical and mental health services</b>	
	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)	<b>Access to emergency medical and mental health services</b>	
	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)	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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)	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	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

<b>115.87 (c)</b>	<b>Data collection</b>	
	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

<b>115.87 (d)</b>	<b>Data collection</b>	
	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

<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes

<b>115.87 (f)</b>	<b>Data collection</b>	
	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

<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	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 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?	yes

<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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

<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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

<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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

<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

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

<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	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. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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 that there has never been a Final Audit Report issued.)	yes