

# PREA Facility Audit Report: Final

**Name of Facility:** Santa Clara County Main Jail

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 06/27/2018

**Date Final Report Submitted:** 01/06/2019

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> 01/06/2019

AUDITOR INFORMATION	
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<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	05/21/2018
<b>End Date of On-Site Audit:</b>	05/24/2018

FACILITY INFORMATION	
<b>Facility name:</b>	Santa Clara County Main Jail
<b>Facility physical address:</b>	150 W. Hedding Street, San Jose, California - 95110
<b>Facility Phone</b>	4082998770
<b>Facility mailing address:</b>	
<b>The facility is:</b>	<input checked="" type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
<b>Facility Type:</b>	<input type="radio"/> Prison <input checked="" type="radio"/> Jail

Primary Contact			
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<b>Facility Characteristics</b>		
<b>Designed facility capacity:</b>	1361	
<b>Current population of facility:</b>	1034	
<b>Age Range</b>	Adults: 18-55+	Youthful Residents:
<b>Facility security level/inmate custody levels:</b>	medium to maximum security	
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	316	

## 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.

### Introduction

On 5/21/18, the PREA onsite audit was conducted at the Santa Clara County Main Jail facility, located at 150 West Hedding Street in downtown San Jose. The Main Jail facility consists of two towers, the North Tower and the South Tower. The demographics of inmates consist of both male and females ranging in ages of 18 to 55+ years of age.

### Notification of Audit

Six weeks in advance of the onsite audit, the lead auditor provided the PREA coordinator with a flyer to be posted throughout the facility announcing the upcoming audit. The flyer explained the purpose of the audit and provided inmates, detainees, and staff with the lead auditor's contact information.

The facility posted the notices on bright paper in both Spanish, Vietnamese and English, dated the flyer and provided a time stamped photo of each of the notices posted in various areas throughout the facility to include: male housing units, male recreation room, male common area, kitchen area, control room, medical waiting area, booking, staff briefing room, contact visiting area, detention lobby area, visitation, and female housing unit. The auditor received two correspondences as a result of the posted notices during the pre-audit phase. The PREA coordinator was contacted to address concerns and respond to the correspondence.

### Pre-Audit Phase

The pre-audit preparation included the facility using the PREA Online Audit System (OAS) to upload information to the pre-audit questionnaire (PAQ). The auditor conducted a thorough evaluation of all documentation and materials electronically submitted by the facility along with data included in the PAQ. The reviewed data included agency policies, procedures, forms, educational materials, training curriculum and rosters, organizational chart, inmate handbook, inmate PREA brochures, certificates of training completion to include acknowledgement of training, sample documents and other relevant materials that were provided to determine compliance with the PREA standards. The analysis of documentation prompted a series of questions that were submitted to the PREA Coordinator in the form of an Issue Paper. Responses to the Issue Paper was submitted by the PREA Coordinator in a timely manner prior to the onsite audit. Throughout the pre-audit phase, auditor maintained weekly contact with the PREA Coordinator and staff.

### Document sampling, Methodology and Review

The auditor requested lists of all inmates staff, contractors and volunteers assigned to the Main Jail for random selection to conduct pre-audit document reviews. The auditor requested a comprehensive list of inmates, detainees, staff, volunteers, and contractors along with relevant facility records (e.g. training records of staff, contractors and volunteers to include staff verification forms, administrative and criminal investigative files, human resource files, inmate grievances, medical and mental health records in

response to sexual abuse allegations and incidents, risk assessments for risk of victimization and abusiveness, inmate education records; intake and comprehensive education sessions, unannounced rounds electronic and log-book entries, retaliation monitoring, Incident Review Board documentation, notice to inmate victim as to the outcome of a sexual abuse investigation). These lists determined the body of information from which the auditor would sample during the pre-audit phase. The request included a complete roster of staff indicating their title, (all) shifts, assignments, to include staff at high, intermediate, and line staff positions, medical, mental health, and administrative staff. Additionally, the audit team requested a list of inmates/detainees, from all 102 housing units identified in the PAQ, vulnerability list (e.g. LGBT), from various ethnic background (Hispanic, Vietnamese, African American) both female and males in addition to various ages (18-55+ years of age), dates of intake and durations of stay. From these listings, the lead auditor selected representative random sampling for interviews and documents to review during the onsite portion of the audit. Random inmate selections were accomplished by the auditor using the Main Jail inmate population roster of 762 inmates assigned to Main Jail and selecting two inmates per page until the selections equaled 24 random inmates and 20 targeted inmates. Random staff selections were accomplished by the auditor using the Main Jail staffing roster which included all staff working during the onsite audit for each shift (A, B, C, D). Auditor selected three staff at random per shift which equaled 12 staff.

Agency provided auditor with the requested listings as requested. From these listings, the auditor conducted a representative sampling for the pre-audit document review and the listing was also used during the onsite portion of the audit. Random selections were conducted by auditor, lists returned to the PREA Coordinator with request for documentation such as personnel, training, investigations, medical and mental health, grievances, supervisory rounds, and inmate screenings. Auditor conducted the document reviews and completed the auditor worksheet for compliance determination prior to the onsite audit. The following Files were reviewed:

Total Files Reviewed 172

Personnel 41

Training 41

Investigations 8

Inmate PREA Education 20

Inmate Screenings 72hr & 30-day 20

Medical 0

Mental health 6

Supervisory Unannounced Rounds Logs 20

Grievances over past 12 months 2

Incident reports over past 12 months 8

Retaliation for reporting sexual abuse or cooperating in a sexual abuse investigation. 0

Allegations of Sexual Abuse & Sexual Harassment over the past 12 months 8

Hotline calls made during past 12 months 0

Personnel and Training Files

The facility has 358 full and part-time staff. Review of mental health records indicate all inmates referred to mental health for identifying a history of sexual abuse during screening were seen by mental health within 24 hours of intake. A total of 20 inmate screening records were reviewed. Four inmates were missing PREA education acknowledgements, three missing initial training acknowledgements and four missing comprehensive training entries in the electronic Jail Management System. Three inmates were missing documented completion of 30-day reassessment. Auditor reviewed 20 electronic training records

of random staff which included two recently promoted. The sample included a variety of job functions and post assignments, including both supervisory and line staff. The review verified both Annual and Refresher PREA training were completed for all. Copy of training curriculum and Academy lesson plan was provided to Auditor for content verification. Review of 12 contractor and nine volunteer training records indicated three contractors were trained in PREA after their start date as evidenced through their signed acknowledgment. Auditor reviewed 20 random custody staff personnel files & verified background clearances conducted on all through FBI, DOJ and found that all 20 selected staff had appropriate background clearances prior to their start date. A review of a random sample of 12 Contractor personnel files found two contractor files did not possess a national background clearance, only state CJIC clearance. Seven contractors had background clearances after their start date. Review of nine volunteer personnel records indicated that three files did not contain updated national or state background clearances. Three other files indicated the background clearance was completed after the volunteers' start date.

#### Grievances

In the past 12 months, the facility received two reports of sexual abuse and sexual harassment using the grievance system. Both allegations were investigated promptly by the Jail crimes Unit.

#### Medical and Mental Health Records

Auditor reviewed six mental health records for inmates who was referred to the mental health unit after alleging history of sexual abuse at screening. Inmates were seen within 24 hours of intake by a mental health practitioner.

#### Hotline Calls

In the past year, the facility received zero hotline calls regarding sexual abuse or sexual harassment. Information received from YWCA staff corroborates the facility statement. No documentation from review of the sexual abuse or sexual harassment investigations indicated that the YWCA was contacted to allege sexual abuse or sexual harassment.

#### Investigative files

The facility reported eight total allegations of PREA related investigations conducted over the past 12 months. Two inmate on inmate sexual abuse allegations, five inmate on inmate sexual harassment investigations and one staff on inmate sexual harassment investigation. All eight cases were investigated by Santa Clara County Jail Crimes Unit. Three cases were found as unsubstantiated and five were determined to be unfounded. The PREA Coordinator has a retaliation monitoring system and indicated there has been no allegations of retaliation over the past 12 months. All sexual abuse investigations and sexual harassment cases are investigated by the Jail Crimes Unit. All special investigators are certified to conduct sexual abuse investigations in a confinement setting. Review of the investigative files indicates the investigators conduct prompt and PREA compliant investigations, using preponderance of the evidence as the standard of evidence. Only two Incident Reviews were conducted during the 12 months prior to the onsite audit.

Auditor contacted Just Detention International (JDI) assistant director to request data on any reporting of sexual abuse or sexual harassment from the Main Jail facility. JDI indicated that no reporting of sexual abuse or sexual harassment have been received from the Main Jail over the past 12 months. JDI recommended auditor follow-up with contacting the YWCA Rape Crisis Center who manages advocacy and sexual abuse, sexual harassment and domestic violence reporting in Santa Clara County. Follow-up was conducted during the onsite audit with two representatives of the YWCA and is documented in the

interview notes located in standard provision 115.53(c).

Auditor established that California maintains a mandatory reporting law and there is no litigation or oversight specific to PREA and sexual safety. The agency/facility is not under a federal consent decree or U.S. DOJ investigation.

Chronological list of pre-audit events are as follows:

3/13/18 - Auditor provided the Agency the Pre-Audit Questionnaire (PAQ), Audit Process Map, PREA Audit Checklist and Instructions for PREA Audit Tour.

3/13/18 - Auditor requested Agency provide lists of Santa Clara County Main Jail inmates, staff, volunteers and contractors assigned to the facility for random selection by Auditor to review Personnel, Training, Investigative, Screening, Medical and Mental Health documentation.

3/13/18 - Auditor submitted random selections of 20 inmates, 20 staff, 9 Volunteers and 12 Contractors from the lists provided by the agency and requested the records for those selections be provided to Auditor for document review during the Pre-Audit phase by 3/21/18.

3/21/18 - Agency provided the requested documentation for Auditor review.

3/21/18 - Agency provided Auditor with requested Personnel, Inmate, Training, Investigative and Screening documents for document review.

3/21/18 - Agency provided Auditor with the requested lists.

4/2/18 - Auditor provided the Agency with the Notice of Auditor poster language in English & Spanish and Pre-Audit and On-Site Audit Timeline for review and action by the PREA Coordinator to be placed in all general areas of the facility with access by both inmates and staff no later than 3/21/18.

4/5/18 - Auditor completed document review.

4/9/18 - English and Spanish Notices of the Audit were posted in general areas of the facility accessible to both residents and staff. The PREA Coordinator provided auditor with photo samples of dated Notice locations.

5/8/18 - The PREA Coordinator provided Auditor with the PAQ and supporting documentation. Auditor and PREA Coordinator communicated throughout the Pre-Audit phase to discuss issues identified within the Pre-Audit Questionnaire and to correct deficiencies and provide clarification prior to the On-Site Audit Phase.

5/9/18 - Auditor submitted On-Site Audit Timeline and Specialized staff list to be completed by Agency. Auditor also requested a housing roster of all currently housed Main Jail Facility inmates and roster of all Main Jail Facility staff assigned to each shift scheduled to work during the on-site audit in order to make random selections of staff and inmates/residents for interviews. Both rosters were also used by the auditor to make random selections for Personnel, Training and Screening document reviews. Agency to provide completed Specialized staff list, staff and inmate rosters to Auditor by 5/11/18.

5/11/18 - Auditor received staff and inmate rosters from Agency to conduct random selections for

interviews.

5/13/18 - Auditor completed PAQ review and submitted Pre-Audit Issue Paper to PREA Coordinator which identified deficiencies in PAQ responses, supporting documentation and request for clarification in some areas.

5/15/18 – Auditor contacted Just Detention International regarding any reporting of sexual abuse or sexual harassment from Main Jail Facility. The response was negative.

5/18/18 – Auditor interviewed the YWCA Rape Crisis Center Director who also indicated there was no contact from the Santa Clara County Main Jail Facility alleging sexual abuse or sexual harassment over the past 12 months.

5/18/18 - Auditor submitted random selection of staff and inmates for On-Site Audit interviews to the PREA Coordinator.

## Onsite Audit Phase

### Entrance Briefing

On the first day of the onsite audit, auditor held an entrance briefing with facility leadership and supervisory staff. Attendance included the Facility Commander, Facility Lieutenant, Main Jail PREA Compliance Manager, Elmwood Facility PREA Compliance Manager, PREA Administrative Manager and the PREA Coordinator. Topics of the meeting include discussion of the goals and expectations regarding the conduct of the audit. Discussion also included auditor's access to all areas of the facility, informal interviews of inmates and staff during the physical plant review, processes conducted by facility staff, purpose of corrective action to enhance practices, safety measures during the onsite audit as well as explanation of Interim Report and Final Report that would be provided to the facility.

### Physical Plant Review

The onsite phase of the audit was conducted over a four-day period: May 21, 22, 23 and 24. The facility's design capacity is 1361. The inmate population on the first day of the onsite audit was 762. Main Jail South tower has eight floors but only the 2nd floor is housing. The first floor is the basement which acts as main control for inmate access into Main Jail South. The remaining floors are closed for demolition. The planned demolition of the South Tower is anticipated to begin October 2018. Main Jail North has eight floors with four of the housing units closed for construction. The first floor is for administration, master control and sally port entrance into the jail.

The site review consisted of reviewing and observing all areas of the entire facility with no restrictions to any area. The following areas were observed (not an exhaustive list): facility configuration, staff supervision of inmates and detainees, housing units, intake/booking, classification and holding areas, medical unit, visitation areas, master control room, recreation areas, mezzanines, maintenance areas and administration areas. The audit team was able to view camera locations, showering areas, and toilet facilities. The audit team was able to informally talk with the inmates, staff, volunteers, contractors, and civilian staff. A comprehensive physical plant review description is as follows:

## SOUTH TOWER



Upon completion of booking & classification, inmates are escorted to the South Tower Main control. Inmates are then sent up 3 flights of stairs to the 2nd West Housing Unit, unescorted. Staff utilize radios to monitor inmate movement between first and second floors. Staff do not enter the stairwell with the inmates. Elevator is only used for disabled inmates. No cameras in stairwell but there is one mirror at the turn. No PREA signage in stairwell.

#### 2A HOUSING UNIT – CLASSIFICATION LEVEL 3 & 4 SURENOS (MALES ONLY):

2 West Core Control Station log book indicated upper management supervisors failed to conduct unannounced visits were conducted on 5/8 C shift, 5/10 B shift, 5/10/ D shift, 5/17 D shift, 5/11 B shift and 5/12 D shift. PREA posters and notice of auditor posters within the housing unit. No opposite sex viewing. Camera placement in each dorm hallway leading to cells. Informal interview of three inmates indicate no cross-gender announcement from female deputies entering housing unit. Inmates also indicate they received inmate handbook and Sexual Awareness Poster during booking/intake. No video provided during that time as they were placed in holding cells awaiting classification interview. Five phones in the housing unit. Grievance boxes provided in housing unit with forms. 13 cameras in the exercise yard. Toilet off yard – no one uses. Should an inmate need toilet, they are escorted in handcuffs back to the housing unit.

#### 2 – 4 F DORM HOUSING UNIT TRUSTEE UNIT (MALES ONLY):

No PREA poster in housing unit. Notice of auditor provided. No opposite sex viewing. Camera located in recreation area, no camera in housing unit. No announcement as male deputies and visitor entered housing unit. Four phones in housing unit. Grievance boxes in housing unit with forms provided. Showers and toilets in dorm PREA compliant.

#### 2 WEST HOUSING UNIT (MALES ONLY):

Dorms 205, 206, 207, 214, 213, 216, and 217 closed for construction/demolition. PREA information posted in each dorm. The remaining five housing dorms are manned. Shower and toilet used by inmates in 2 West housing unit. Toilet in shower area non-compliant. Provides for cross-gender viewing during toileting by staff. Shower non-compliant as there is minimal if no supervision during showering by inmates and shower area presents a huge Blind Spot. Showering is conducted by one housing unit at a time. Two cameras in cell access housing unit hallway. Informal interview with three inmates from two separate units indicate no cross-gender announcement is ever conducted by female staff.

#### 2-WEST MAX HOUSING UNIT – ADMINISTRATIVE SEGREGATION:

Closed for construction/demolition. No inmate access. Two cameras in cell access hallway with one rolling phone and one individual shower cell.

#### NORTH TOWER

2nd Floor Medical – male and female inmates: 10 cameras overlook Control area, reception & hallway supervision leading to PODs B & C. Log book reviewed by auditor & found consistency in the log book entries as it relates to unannounced rounds conducted by Watch Sergeants and Lieutenants on each shift. No cross-gender announcement observed as there was already a female and male in the unit. 2B Special Housing Unit provides PREA signage and Notice of Auditor posters. Information related to Rape Crisis Center & Advocacy contact provided near the three phones located within the unit. PREA Signage provides for limits of confidentiality and that the confidential phone line is not monitored. 18 cameras in

the medical unit housing area. Four cameras located in the Sun-Deck. PREA signage observed in the open general area of the POD. Showers are PREA compliant to discourage cross-gender viewing. Inmates shower one at a time. To dissuade cross-gender viewing, medical staff assists inmates with showering if staff of the same sex of the inmate is not available. Facility maintains both male and female staff members to supervise this area on each shift. Main Hallway – Waiting rooms #1 & #4 PREA compliant regarding cross-gender viewing during toileting. 2C POD Infirmary - Medical staff is on duty 24/7. Female inmates can be housed on this floor. Recreation yard provided. PREA signage & information related to Rape Crisis Center & Advocacy contact provided next to phones which are located near the front sally-port door entrance. One hearing-impaired phone located in the general area. Cells M13 thru M19 shower access and toilet are PREA compliant. Cell M-12 is PREA compliant. M11 (10 bed ward) is PREA compliant. M1 and M10 is PREA compliant. M2 thru M9 is PREA compliant. Female inmates are provided privacy screens for toileting and showering.

3rd Floor – Mezzanine, no inmate housing or access.

4th Floor Housing – Males only – Max/PC/General Population Supervision: Four cameras overlooks Control area and hallways leading to PODs A thru C. All PODs have similar architecture. Two PREA posters located in the hallways which leads to the PODs. POD 4A currently vacant of inmates as it is under construction. Control log book reviewed by auditor and found inconsistency in the log book entries as it relates to unannounced rounds on each shift. Review determined that 5/12 A-Team and 5/16 A-Team did not conduct unannounced rounds of the assigned shift. Central log book entries were cross-referenced with housing POD logs and the non-compliance was found to be consistent. Cross-gender announcement was not observed as cross-gender staff was already in POD when auditor arrived. PREA signage & information related to Rape Crisis Center & Advocacy contact provided next to phones which are located near the front sally-port door entrance and on floor columns. PREA signage provides for limits of confidentiality and monitoring and is compliant with the PREA standards. Four cameras in the Sun-Deck and three cameras in the multi-purpose room. No PREA signage in the multi-purpose room. PREA video played every Wednesday on a loop on television in each POD in the facility. Toilets located in each cell with no cross-gender viewing. Four showers in the units, two upstairs and two downstairs. All four have frosted windows and are PREA compliant to discourage cross-gender viewing. Housing floor has eight visiting rooms which serves all floor PODS. Grievance box in housing unit with forms which allows inmates to submit grievance anonymously.

5th Floor Level 3 & 4 General Population Housing (male inmates only):

Seven cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. Two PREA posters located in the hallways which leads to the PODs. PODs A and B are closed and under construction. Control log book reviewed by auditor. Review determined that 5/12 A-Team and 5/16 A-Team did not conduct unannounced rounds of the assigned shift. Central log book entries were cross-referenced with housing POD logs and the non-compliance was found to be consistent. Each POD is architecturally similar. Cross-gender announcement not observed. PREA signage & information related to Rape Crisis Center & Advocacy contact provided next to phones. 8 phones in housing unit. Three cameras in the Sun-Deck and two cameras in multi-purpose room. 21 cameras in each POD. No PREA signage in the multi-purpose room. PREA signage in the open general area of the POD. Toilets in cells and four frosted unit showers are PREA compliant to discourage cross-gender viewing. Grievance box in housing unit with forms which allows inmates to submit grievance anonymously.

6th Floor Custody level 3 and 4, Protective Custody Housing (male inmates only):

Seven cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. Two

posters located in the hallway leading to each POD. Eight visiting booths located along hallway leading to 6B POD. Log book reviewed by auditor & found inconsistency in the log book entries as it relates to unannounced rounds conducted by intermediate or higher-level supervisors on each shift. Auditor noticed 5/9/18 night shift and 5/10/18 day shifts were absent of unannounced rounds. Notice of Auditor signage near front entrance door. Each POD is architecturally similar. PREA signage & information related to Rape Crisis Center & Advocacy contact provided near the seven phones located within the unit. PREA signage located near the front sally-port door entrance. PREA signage provides limits of confidentiality, hotline is toll free and informs call is not monitored by the agency. 10 phones in each POD. Four cameras in the Sun-Deck and three cameras in the multi-purpose room. PREA signage in the multi-purpose room. 21 cameras in each POD. Doors on cells provide cross-gender opportunity for viewing inmates during toileting. Windows are located in middle of door and again in bottom of door, which allows central POD control deputy to view buttocks as inmates are toileting. Informal interview with inmate indicates some inmates cover their bottom door window for privacy and dignity during toileting. Showers are PREA compliant to discourage cross-gender viewing. Grievance boxes in each POD with grievance forms available on top of each box.

7th Floor General Population Housing Level 3 & 4 – General Population (male inmates only):

Nine cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. All PODs are architecturally similar. Eight visiting booths located along hallway leading to 7B POD. Log book reviewed by auditor & found inconsistency in the log book entries as it relates to unannounced rounds conducted by intermediate or higher-level supervisors on each shift. Auditor noticed 5/19/18 B-team day shift was absent of unannounced round(s). Notice of Auditor posters, PREA signage & information related to Rape Crisis Center & Advocacy contact provided near the front sally-port door entrance. 7A, POD - No cross-gender announcement conducted. PREA posters also located on pillars near the six phones in PODs B and C, and the seven phones in POD A. PREA posters provided for limits of confidentiality, toll free and indicated that the confidential phone line is not monitored by the agency. Three cameras in the Sun-Deck and three cameras in multipurpose room in all 7th floor PODs. No PREA signage in the multi-purpose room. Cells and showers are PREA compliant to discourage cross-gender viewing.

8th Floor – POD 8A Mental Health Housing (Co-Ed ward):

Nine cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. Eight visiting booths lined along hallway leading to POD B. Log book reviewed by auditor & found inconsistency in the log book entries as it relates to unannounced rounds conducted by intermediate or higher-level supervisors on each shift. Auditor noticed shifts on 5/11/18 were absent of unannounced rounds. 8A POD – Direct Supervision POD. Both male and female inmates in custody in this POD. 22 cameras located in this POD. Female and male staff supervise this floor at all times. Cross-gender announcement conducted. No PREA signage located in the housing unit. Notice of Auditor was located near the front entry door. Five phones in the POD. Four cameras in the Sun-Deck. No PREA signage in the multi-purpose room. Cells are PREA compliant to discourage cross-gender viewing. Privacy screens provided for female inmates who wish to change clothing in cells. Designated showers for females on 2nd floor with privacy screens provided. Grievance box located in the POD, however, no grievance forms to accompany the grievance box. General discussion with inmate indicates he was not provided a handbook or sexual awareness pamphlet upon intake or during classification. Inmate has been in this POI for one week.

8th Floor – POD 8B Level 3 & 4, General Population (males only):

Seven cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. Eight visitor booths along hallway leading to POD B. Log book reviewed by auditor & found inconsistency in the

log book entries as it relates to unannounced rounds conducted by intermediate or higher-level supervisors on each shift. Auditor noticed 5/12/18 day shift was absent of unannounced rounds. Auditor observed the cross-gender announcement. PREA signage & information related to Rape Crisis Center & Advocacy contact and Notice of Auditor not available in the unit. 21 cameras in the POD. Five phones observed on the floor. Four cameras in the Sun-Deck. Three cameras and no PREA signage in the multi-purpose room. Cells are PREA compliant to discourage cross-gender viewing. PREA compliant toilets in cells and four showers in PODs, two upstairs and two downstairs with frosted windows for privacy and dissuade cross-gender viewing. Grievance box located in unit on ground floor near the front door with grievance forms included.

8th Floor – POD 8C Protective Custody Housing (males only):

Seven cameras overlook Control area & direct supervision of hallways leading to all PODs A thru C. Eight visitor booths along hallway leading to POD B. Log book reviewed by auditor & found inconsistency in the log book entries as it relates to unannounced rounds conducted by intermediate or higher-level supervisors on each shift. Auditor noticed 5/12/18 day shift was absent of unannounced rounds. Auditor observed the cross-gender announcement. PREA signage & information related to Rape Crisis Center & Advocacy contact and Notice of Auditor not available in the unit. 21 cameras in the POD. Five phones observed on the floor. Four cameras in the Sun-Deck. Three cameras and no PREA signage in the multi-purpose room. Cells are PREA compliant to discourage cross-gender viewing. PREA compliant toilets in cells and four showers in PODs, two upstairs and two downstairs with frosted windows for privacy and dissuade cross-gender viewing. Grievance box located in unit on ground floor near the front door with grievance forms included.

#### BOOKING & INTAKE:

Booking and intake are separated between male and female sections. Three PREA posters located in each booking and intake areas. PREA posters on window of each holding cell in the intake area. The male booking area has seven stations and has sound barriers for each station. Informal interview with intake staff indicates they do not have inmates read anything prior to having them sign for receiving their zero tolerance and reporting information to include understanding the Sexual Awareness Pamphlet and inmate handbook. Inmate comprehensive education is provided through PREA video on two large televisions in the booking waiting area. Only one television works. The other television has not worked for over a month due to awaiting an electronic part per intake officer. Auditor observed that inmates in the booking holding tanks cannot see or hear the only working television. The inmates seated in the holding area have their backs to the only working television. There are 27 cameras in men's booking. Cameras in holding cells and auditor reviewed all camera monitors in the facility. Camera view is pixelated over the toilet area in each monitored cell. No availability for cross-gender viewing during toileting through the video monitor. Five phones located in the booking/intake area.

In the female booking area, there are available areas to provide inmates their initial interview questions. There are 12 cameras in the female booking area. PREA posters are available throughout the booking area. There are three holding cells for inmates who have completed booking and are pending transfer to Elmwood Women's facility. Holding cells are PREA compliant. The booking process is the same as with the men's booking section. Female inmates who are to be housed in the Main Jail are seated in the booking holding area and obtain their comprehensive education through a video on the television with Spanish captions. Inmates to be transferred to Elmwood Women's facility are maintained in holding tanks and are provided comprehensive education once they are transported and arrive at Elmwood facility's Processing Unit, where they are provided the PREA video before being housed. Auditor reviewed all documents to include the screening instruments while reviewing the conduct of the medical, booking and intake process. Upon arrival, inmates meet the intake medical nurse who begins the PREA interview

process of the screening instrument and refers inmate to mental health if they indicate a history of sexual abuse. Inmates are fingerprinted and interviewed by the booking/intake officer and provided inmate handbook, Sexual Awareness Pamphlet and signs for receipt of their paperwork and documentation. Inmate is then held either in an open area or holding tanks, based upon their classification, to view PREA video while awaiting classification.

#### CLASSIFICATION UNIT:

PREA Posters located in the Classification area and inmate rights poster is located on each classification desk. Informal interview with classification officer indicates they require each inmate read their rights to be free from sexual abuse, sexual retaliation and sexual harassment. The reading also identifies if the inmate can read. If inmate cannot read, the classification officer verbally explains the inmate's rights under PREA, reporting methods, zero-tolerance and agency's response policy and procedures for responding to such incidents. There are 24 cameras throughout the classification area to include holding tanks. Holding tank B-50 provides cross-gender viewing during toileting as the privacy curtain is missing. Holding Tank B-49 provides PREA video in a loop. This is the only holding tank that provides a PREA video. There are no classification sound barriers to maintain confidentiality for inmate who are responding to sensitive PREA questions. Anyone walking behind inmates during their interviews or inmates being interviewed in the next booth can overhear each other's responses. Informal interview with classification officers indicate that classification maintains all hard copy files on inmates assigned to Main Jail. Inmates transferred to Elmwood Men's or Women's facility are maintained by the Elmwood classification unit.

#### LAUNDRY:

Laundry is comprised of three sections. The main hallway that has one camera, two clothing storage rooms – each has one camera and the back storage area. No washing or drying machines, only clothing storage. The back storage area, which is as long as the entry hallway, contains clothing storage bins, contractor's office, back stair well and contractor's break area. The back storage area has two cameras which covers the contractor's office and the storage area. There is a red barrier on the floor that indicates inmates are prohibited from entering this area. There is a blind spot in the back storage area. This area includes a recessed stairwell that leads to upper floor and a recessed hallway for storage. Inmates clean the back storage area under supervision of one contract staff member. The supervision ratio is one staff member to six inmates on weekdays and one staff member to seven inmates on weekends.

#### COURT HOLDING AREA:

Court holding has a number of cells which maintains inmates awaiting court for the day. The court holding area is connected to the court tunnel. The court holding area belongs to the Main Jail and the court tunnel is maintained by the court deputies, not a part of the Main Jail. The court holding area has nine cameras and 23 holding cells. Holding cell B-117, across from the supervision hub station provides for cross gender viewing during toileting by both security staff and inmates being escorted to holding cells. Both male and female inmates are contained in the holding cells per gender and classification.

#### MAIN JAIL SOUTH CONTROL:

Main Jail South Control has six cameras and two mirrors. The area has six holding cells/tanks. Holding tank #1 also provides direct cross-gender viewing during toileting. From the hallway, viewing goes directly to the cell toilet. Holding cell #6 also provides cross-gender viewing during toileting. As custody staff enters the area the windows located door-side allow for direct viewing of inmates during toileting. The

mirror installed for the surveillance of holding cell #6 points to the floor directly below it and fails to provide supervision of the holding cell.

Once inmates have completed processing at Control, they travel via two story stair well to the second floor housing unit. Deputies use radios to supervise the number of inmates entering the stair well to the deputies on the second floor who supervise the inmate(s) arrival.

#### FOOD SERVICE:

Inmates are not allowed in the food service area as it is a restricted area, located on the main floor which houses administrative offices and Main Control. No inmate dining rooms as inmates eat meals in their PODs. Staff dining room is off the main kitchen. No inmates serve or work in the kitchen. Meals are prepared and served by contract staff. Auditor observed two coolers, two freezers, two dry goods storage areas, and one dish room area. Two cameras in the kitchen area located at the two main entry points. Four cameras in hallway leading to the kitchen and one camera on the loading dock.

#### MEZZANINE FLOORS:

Mezzanine Floors are located between administrative and housing floors only accessed by one elevator controlled by Central Control. No inmates allowed in this elevator. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units and electrical units for the Main Jail. Architecture is similar to all Mezzanines unless narrative indicates differently.

- The Penthouse mezzanine is located above the eighth floor housing unit. One camera inside this machine room and one camera in the access area outside of the elevator.
- 8th Floor Mezzanine, located above 7th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units and electrical units for the Main Jail.
- 7th Floor Mezzanine, located above 6th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units and electrical units for the Main Jail.
- 6th Floor Mezzanine, located above 5th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units, breaker room and electrical units for the Main Jail.
- 5th Floor Mezzanine, located above 4th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units breaker room and electrical units for the Main Jail.
- 4th Floor Mezzanine, located above 5th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. Mezzanines house air conditioning units breaker room and electrical units for the Main Jail.
- 3rd Floor Mezzanine, located above 4th floor. Cameras are located in the mezzanine elevator, entry area outside of the elevator to the mezzanine floor. This mezzanine covers the complete floor. It measures the same areas as the Control area, visiting area, PODs A, B and C of any of the housing units. The area is storage for fan belts, construction materials and Medical equipment. There are no cameras inside of the unit, only in areas for access to the area.

#### INTERVIEWS:

Prior to the onsite audit, the auditor had requested staff and inmate roster of those assigned to the Main Jail facility to include hire dates for staff and contractors. Inmate roster included intake and earliest possible release dates to include housing unit and gender from various classification levels. During the onsite audit phase, the audit team conducted formal interviews of staff, contractors and volunteers in

conference rooms. Formal interviews of inmates were conducted in interview rooms located outside the housing units. All interview locations were areas away from staff and inmates and provided privacy to conduct confidential interviews.

The auditor formally interviewed 44 inmates from all of the occupied housing units; over 42 staff, of which 36 were specialized staff and included contractors and volunteers. The auditor interviewed the Sheriff (Head of the agency) - designee Assistant Sheriff, the PREA coordinator, PREA compliance manager. Specialized staff interviewed included the agency contract administrator, Shift Sergeant supervisor who serves as intermediate/higher level facility staff, medical and mental health staff, administrative (human resources) staff, volunteers and contractors, investigative staff, staff that perform screening for risk of victimization and abusiveness, staff who supervise inmates/detainees in isolation, incident review team staff, designated staff member charged with monitoring retaliation, security staff who have acted as first responders, intake staff, Internet Technology staff, mail room staff, training staff, and random sample of staff. Santa Clara County Main Jail has four security shift teams – A, B, C and D. There are two security staff shifts daily. The auditor conducted staff interviews from each shift. There were no youthful inmates at the facility during the onsite audit phase. The auditor conducted the following number of inmate interviews during the onsite phase of the audit:

Population during onsite audit: 762

Actual interviews conducted -

Total Minimum 30

Random Interviews 24

Targeted Inmates 20

Youthful Inmates none

Physical Disabilities 2

LEP 1

Cognitive Disabilities 3

Lesbian /Gay /Bisexual 3

Transgender & Intersex 1

Ad-Seg for Risk of Sexual Abuse 2

Inmates Who Reported Sexual Abuse 1

Inmates Who Reported Sexual Abuse During Screening 7

Santa Clara County Main Jail has four security shift teams – A, B, C and D. There are two security staff shifts daily. The auditor conducted staff interviews from each shift.

Staff Interviews

Actual Interviews Conducted

Total Minimum 33

Specialized Staff Total 28

Random Staff Total 11

Agency Leadership Total 4

AGENCY LEADERSHIP

Agency Head or Designee 1  
Facility Commander 1  
PREA Coordinator 1  
PREA Compliance Manager 1

#### SPECIALIZED STAFF

Agency Contract Administrator 1  
Intermediate or Higher Level Facility Staff (responsible for conducting unannounced rounds) 1  
Line Staff Who Supervise Youthful Inmates none  
Medical & Mental Health Staff 2  
Administrative Human Resources Staff 1  
Non-medical Staff Involved in Cross-gender Strip or Visual Searches 2  
SAFE/SANE Examiner 1  
Volunteers & Contractors Who Have Contact with Inmates 4  
Investigative Staff 5  
Risk Screening Staff 1  
Staff Who Supervise Inmates in Segregated Housing 1  
Incident Review Team Staff 1  
Designated Staff Member Charged with Monitoring Retaliation 2  
1st Responders (custody & non-custody) 2  
Intake Staff 1  
Staff Who Respond to Grievances 1  
Mail Staff 1  
Training Staff 1

#### Exit Briefing

On the final day of the onsite audit, a debriefing was held with the facility's leadership staff. Attendees included the PREA Coordinator, PREA Administrative Manager, Compliance Sergeant, PREA Compliance Managers from each facility, Facility Commander, Criminal and Major Crimes Investigators. The purpose of the meeting was to discuss onsite observations, and trends. During this process, specific feedback was provided and included: generalized facility strengths and challenges as it relates to PREA standards and the overall sexual safety of the facility. Lastly the audit team went over next steps the facility should expect as the audit moves into the post audit phase to include the Interim Report and Corrective Action Phase leading to the Final Report.

#### Post-Audit Phase

During the post-audit phase, the auditor provided the facility with a post-audit issue log to outline corrective action recommendations found in non-compliant standards during the pre-audit (PAQ) and on-site phases. The auditor was in constant communication with the PREA Coordinator to provide additional documentation as needed. The PREA Coordinator team and auditor conducted a conference call to discuss the non-compliant issues identified in the post audit issue log to determine if there were any questions or concerns regarding the implementation of any of the corrective action recommendations. The auditor took 45-days from the end of the onsite audit phase to write the Interim Report. The Corrective Action phase expires on 1/4/19. The Final Report is to be submitted on or before 2/3/19.



**Corrective Actions and Recommendations:**

Corrective actions and recommendations are provided at the end of each non-compliant standard-specific sections.

## 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.

### Facility Characteristics

Santa Clara County Sheriff's Office Custody Division is the fifth largest jail system in California and among the 20 largest systems in the United States. The Custody Bureau consists of several divisions: Main Jail Facility, Elmwood Correctional Facility, Custody Administrative Services, Jail Reforms, Support Services and Compliance.

The Santa Clara County Main Jail Complex, which was built in 1956, is located at 150 West Hedding Street in downtown San Jose and is divided into Main Jail North and Main Jail South. The facility houses county and state inmates and is supported by 358 full and part-time personnel who may have contact with inmates, 15 part-time employees and 343 full-time employees. There are 398 contractors and volunteers who are assigned to this facility. Medical and Mental Health practitioners and food service are contracted staff. The Complex maintains a medical housing unit which provides inmate medical services 24/7, and dental clinic. Medical and Mental health practitioners are contracted through Santa Clara County Health Services. Food service workers are Santa Clara County employees who report to the Food Services manager, who reports directly to the Undersheriff. Contracted educational services are provided through Milpitas Adult Education.

Inmate population on first day of the onsite audit was 762. Agency lists the total inmate housing design capacity of the Main Jail as 1361. Main Jail South, consisting of eight floors of housing units, is scheduled for demolition to erect a new jail building on the existing Main Jail South site. Only the basement Main Jail South Control area and 2nd West Housing Unit of Main Jail South is utilized for housing and holding inmates pending housing assignments. The remainder of the building has been sealed off. Only male inmates are housed in the South tower. The south tower consists of the following housing units:

- 2A housing unit – classification level 3 & 4 Surenos
- 2 – 4 f Dorm housing unit trustee unit
- 2-West Max housing unit – administrative segregation
- 2 West housing unit
- One large recreation area consisting of numerous segregation pens for inmate and institutional safety during recreation of inmates

The North Tower consists of the following housing units and support services. Each housing unit has a recreation area and media room attached:

- 2nd Floor Main Control, administration offices, dental and medical offices and treatment rooms, kitchen and staff dining
- 2nd Floor Medical Unit 2A Special Housing – co-ed inmates
- 2nd Floor Medical Unit 2b Special Housing – co-ed inmates
- 2nd Floor Medical Unit 2C Infirmary Housing – co-ed inmates
- 3rd Floor – Mezzanine, no inmate housing or access
- 4th Floor - POD A – Closed for construction

- 4th Floor - POD B Level 4 Max/PC/General Population Supervision – male inmates
- 4th Floor – POD C Level 4 Max/PC/General Population Supervision – male inmates
- 5th Floor – POD A -closed for construction
- 5th Floor – POD B -closed for construction
- 5th Floor – POD 5C Level 3 & 4 General Population Housing (male inmates only)
- 6th Floor - POD 6A Custody level 3 and 4, Protective Custody Housing – male inmates 6th Floor - POD 6B Custody level 3 and 4, Protective Custody Housing – male inmates 6th Floor - POD 6C Custody level 3 and 4, Protective Custody Housing – male inmates 7th Floor – POD 7A General Population Housing Level 3 & 4 – male inmates
- 7th Floor – POD 7B General Population Housing Level 3 & 4 – male inmates
- 7th Floor – POD 7C General Population Housing Level 3 & 4 – male inmates
- 8th Floor – POD 8A Mental Health Housing co-ed inmates
- 8th Floor – POD 8B Level 3 & 4, General Population – male inmates
- 8th Floor – POD 8C Protective Custody Housing – male inmates
- Booking and Intake
- Classification Unit
- Laundry
- Court Holding Tanks
- Kitchen to include staff dining room
- Eight Mezzanine Floors which contain construction material, electrical and air duct access. No inmates allowed on any of the Mezzanine floors.

#### Inmate Programs

Inmate programs at the facility run during both day and night shifts. The programs are run by various civilian staff, paid and volunteer, and monitored by deputy sheriffs assigned to that area of supervision. All staff, sworn and non-sworn are responsible for facilitating inmate programs funded by the General Fund or the Inmate Welfare Fund. Inmate programs are as follows:

Adult Basic Education (GED) English as a Second Language  
 Literacy Independent Study  
 Anger Management Alcoholics Anonymous (English and Spanish)  
 Roadmap to Recovery Narcotics Anonymous

In addition to the programs listed above, religious volunteers of all denominations visit the Santa Clara County Jail complexes to meet inmate's religious needs, seven days a week, during both the day and evening shifts. Additional programs are as follows:

#### 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 (IWF) 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.

The IWF Committee shall meet twice a year or more often if determined necessary. All meetings shall be held in the Lower Level Conference Room at 70 West Hedding Street, San Jose or in another location when notice has been duly posted in a conspicuous place and as otherwise may be required by law.

IWF Committee meetings are open to the public to attend in compliance with regulations set forth in the Brown Act.

## AUDIT FINDINGS

### Summary of Audit Findings:

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.

<b>Number of standards exceeded:</b>	2
<b>Number of standards met:</b>	43
<b>Number of standards not met:</b>	0

### Interim Report summary of Audit Findings

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.

Number of Standards Exceeded: 2

115.64; 115.71

Number of Standards Met: 31

115.12; 115.14; 115.16; 115.18; 115.21; 115.22; 115.31; 115.34; 115.35; 115.42; 115.43; 115.52; 115.53; 115.54; 115.62; 115.63; 115.65; 115.67; 115.68; 115.72; 115.73; 115.76; 115.77; 115.78; 115.82; 115.83; 115.87; 115.88; 115.89; 115.401; 115.403.

Number of Standards Not Met: 12

115.11; 115.13; 115.15; 115.17; 115.32; 115.33;  
115.41; 115.51; 115.61; 115.66; 115.81; 115.86.

### Summary of Corrective Action (if any)

This interim report is based on findings in a PREA compliance audit. Please review the non-compliant standards identified in "Number of Standards not Met." The Corrective Action Recommendations can be found at the end of each non-compliant standard

### Final Report summary of Audit Findings

During the corrective action phase, the auditor-maintained contact with the PREA Coordinator, PREA Administrator and facility PREA Compliance Manager in order to collaborate on bringing the facility into compliance with the non-compliant PREA standards. The auditor submitted 3 separate Issue Papers, each of which identified the 12 non-compliant standards, reason for the non-compliant findings and recommendations for the facility to come into compliance.

On 9/19/18, auditor conducted an onsite visit to the facility in order to verify implementation of a number of the corrective action recommendations. Auditor visited the following areas within the facility:

Main Jail North:

- Classification to verify non-compliant holding cells have been frosted to dissuade cross-gender viewing during toileting.
- Interview classification staff regarding 72-hour screening and 72-hour reassessments
- Booking and intake to verify inmates can view the PREA video in the booking and intake area.
- Interview booking and intake staff to verify practice of ensuring inmates have access to PREA initial and comprehensive education and determine if inmates have any disabilities prior to providing this education to the inmates.
- Observe Voiance contract interpreting posters with contact numbers being available to inmates going through intake.
- Review initial PREA education inmate rights in the 3 predominate language at each booking station.
- Checked \*99 YWCA Hotline to ensure it works in two randomly selected holding cells.
- 6th and 8th floor housing units to observe and verify PREA poster availability
- Check 6th floor corrective action recommendation implementation for cell door frosting which dissuades cross-gender viewing during toileting.
- Check GTL YWCA Hotline \*99 to ensure it works in both 6th and 8th floor housing units.
- Conduct random interviews of both staff and inmates regarding cross-gender announcements and when PREA video is played in the units.
- Review housing unit logs on the 6th and 8th floor to verify PREA video is played in the units weekly, both unannounced rounds by supervisory staff and cross-gender announcements.
- Laundry area to ensure blind spot has been corrected

Main Jail South:

- Basement control area to review non-compliant holding tanks and monitoring mirror to ensure they have been brought into compliance
- 2nd Floor housing cells
- Checked GTL Rape Crisis Center hotline
- Conduct inmate interviews to determine staff compliance with cross-gender announcements
- Observe non-compliant shower and toilet area
- Conduct inmate interviews to verify non-compliant showers are shut down and alternative PREA compliant showers are utilized on a regular basis

During the corrective action phase, the auditor conducted document reviews of:

- Contractor personnel records to determine background clearance compliance
- Training records to verify compliance with the training standard for both contractors and volunteers
- Inmate screening records to ensure inmates have signed for their initial PREA education and received supplementary documentation such as inmate handbook and PREA brochure.
- Review updated objective screening instrument to verify compliance with the standard
- Inmate medical records review to verify practitioners are informing inmates of their duty to report and limitation of confidentiality at the initiation of services.
- Collective bargaining MOUs
- Incident Review Board case review documentation

Upon completion of the 180-day corrective action phase, auditor provides the following standard compliance summary:

Number of Standards Exceeded: 2

115.64; 115.71

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; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.65; 115.66; 115.67; 115.68; 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.

Number of Standards Not Met: 0

## **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 2018 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 2018 designates a Main Jail 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 periodically he does not have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. He has additional duties as Probationary Training Officer which takes precedent and reduces the amount of time available for him to complete the PREA responsibilities for his assigned facility.</p> <p><b>CONCLUSION:</b> Based upon the analysis of evidence for standard 115.11, the auditor finds the facility is not fully compliant with Standard provision 115.11(c) and corrective action is required.</p> <p><b>Corrective Action Recommended:</b> 1. Agency to provide the PREA Compliance Manager with the sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.</p>



Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

**Corrective Action Completion:**

Agency provided auditor with a copy of the 7/31/18 Directive from PREA Coordinator Captain Hoyt to all facility PREA Compliance managers mandates that the Agency PREA Compliance Manager will assist the facility compliance managers with their PREA responsibilities. If additional assistance is needed, PREA compliance managers may schedule assistance from other PREA team managers.

On 9/19/18, auditor conducted a 90-day onsite status review of the facility. Interview with the PREA Compliance Manager verified he now has sufficient time and authority to coordinate the facility's efforts to comply with the PREA Standards. Currently, he continues to be the Probationary Training Officer but is provided assistance with his PREA duties from the Agency PREA Compliance Manager and PREA team managers. Agency proposes creating a Probationary Training Officer to take over the additional duties assigned to the PREA Compliance Manager.

Auditor has determined that agency meets all provisions of standard 115.11.

115.12	<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><b>CONCLUSION:</b> 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>During the on-sight physical plant review, auditor observed a number of areas where supervision is minimal to non-existent which leads auditor to see these areas as Blind-Spots: 2 WEST HOUSING UNIT (MALES ONLY): Shower non-compliant as there is minimal if no supervision during showering by inmates and shower area presents a huge Blind-Spot. Showering is conducted by one housing unit at a</p>

time.

**LAUNDRY:**

There is a blind spot in the back storage area. This area includes a recessed stairwell that leads to upper floor and a recessed hallway for storage.

**MAIN JAIL SOUTH CONTROL:**

Holding cell #6 mirror installed for the surveillance of holding cell #6 points to the floor directly below it and fails to provide supervision of the holding cell.

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.

115.13(c): Agency provided auditor with a copy of the Staffing Plan Review Board meeting minutes which occurred on 2/8/18. 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 1/12/18. 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.

115.13(d): Review of PREA Policy 14.15 mandates that each shift sergeant or Watch Commander will conduct and document unannounced rounds to identify and deter staff sexual abuse with particular detention to remote (isolated) areas of the facility. Staff is prohibited from alerting other staff members during supervisory rounds, unless such announcements are related to an emergency or a legitimate operational function. Agency provided auditor with copies of Booking and Intake, housing units 2 West and housing units F1 through F8 random snapshots of log books which identifies annotations from primarily watch sergeants conducting unannounced rounds for each shift between May 2017 and February 2018. The Main Jail has only two shifts per day, 6am to 6pm and 6pm to 6am. Interview with Shift Sergeant indicates she conducts unannounced rounds on each shift and logs her presence in the main floor control log and each housing unit logs. Auditor onsite review of control and housing logs verifies the Sergeant's statement. The Shift Sergeant prevents staff from alerting other staff while conducting unannounced rounds is through her expectations of the shift staff. Staff is trained of the Shift Sergeant expectations during the Shift meetings.

**CONCLUSION:**

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.13(a) and corrective action is required.

**Corrective Action Recommended:**

1. Agency to address the blind spots identified in the 2 West Housing Unit, Laundry and Main Jail South Control area. Auditor to review during the 90-day onsite status review.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

**Corrective Action Completion:**

PREA Coordinator issued Directive P2018-07 dated 8/10/18 to all laundry room staff and custody staff, which prohibits inmates in the back area to clean. Agency provided auditor with photo verification of posted directive in laundry room and hallway access.

2nd West shower directive and photos of new shower area, and photo of directive from PREA Coordinator to 2nd West staff. Directive posting sent to auditor on 08/24/18. Directive states: Effective Sunday, August 12th, 2018, we will no longer use the 2nd West group shower, and restroom area for inmates. The 2nd West group shower is a PREA violation because it has been identified as a blind spot. The toilet is a PREA violation because it allows for cross-gender viewing. In order to become compliant with PREA standards, inmates housed in 2-5 through 2-16 will now take showers on night shift, in 2nd East.

A night shift Officer/Deputy will escort inmates housed in dorms 2-5 through 2-16 to 2nd East and allow them to shower in the various dorms on the right side of the tier which allows for privacy (239E; 240E; 241E; 242E) or you may also use the Ad Seg 2nd West and 2nd East Max single occupancy showers if sufficiently staffed.

While inmates are showering, an Officer/Deputy will stand by to ensure safety and security is enforced. The Officer/Deputy has discretion on the number of inmates taken to the shower at a time, so long as they ensure that only one inmate is allowed in each shower stall.

-Main Jail South holding cell mirror re-adjusted. Agency provided auditor verification photos on 08/24/18. On 9/19/18, auditor conducted a 90-day onsite status review of the facility. All three areas were observed by the auditor who verified compliance.

Auditor has determined that agency meets all provisions of standard 115.13.

115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.14(a), 115.14(b) and 115.14(c): N/A - Standard 115.14 is not applicable to Santa Clara County Jails as they do not house youthful inmates per policy. 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><b>CONCLUSION:</b> 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. 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. 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 supervision or interacting with shall announce their presence when entering the inmate housing unit. 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</p>

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 a number of areas where cross-gender viewing during toileting or other instances of undress that is not incident to routine cell checks:

**2 WEST HOUSING UNIT (MALES ONLY):**

Toilet in shower area non-compliant. Provides for cross-gender viewing during toileting by staff when walking past entry door enroute to adjacent office.

**6th Floor Custody level 3 and 4, Protective Custody Housing (male inmates only):**

Doors on cells provide cross-gender opportunity for viewing inmates during toileting. Windows are located in middle of door and again in bottom of door, which allows central POD control deputy to view buttocks as inmates are toileting.

**COURT HOLDING AREA:**

Holding cell B-117, across from the supervision hub station provides for cross gender viewing during toileting by both security staff and inmates being escorted to holding cells.

**MAIN JAIL SOUTH CONTROL:**

Holding tank #1 also provides direct cross-gender viewing during toileting. From the hallway, viewing goes directly to the cell toilet.

Holding cell #6 also provides cross-gender viewing during toileting. As custody staff enters the area the windows located door-side allow for direct viewing of inmates during toileting.

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.

115.15(f): Agency states that 100% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs. Cross-Gender pat down search training power-point and PREA I power-point refresher training was provided to auditor. Interview with a random sample of 12 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. Review of Sheriff's Academy lesson plan and refresher training sign-in rosters verify training has been conducted for custody staff.

#### CONCLUSION:

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

#### Corrective Action Recommended:

1. Auditor to conduct an onsite observation status check of the Main Jail housing units to include interview of a random sample of inmates to verify compliance with agency policy and PREA standard requirements of cross-gender announcements.
  
2. Agency to review and correct cross-gender viewing opportunities in the following areas in order to be compliant with standard provision 115.15(d):
  - (a) - 2 WEST HOUSING UNIT (MALES ONLY):

Toilet in shower area non-compliant. Provides for cross-gender viewing during toileting by staff when walking past entry door enroute to adjacent office.

6th Floor Custody level 3 and 4, Protective Custody Housing (male inmates only):  
Doors on cells provide cross-gender opportunity for viewing inmates during toileting. Windows are located in middle of door and again in bottom of door, which allows central POD control deputy to view buttocks as inmates are toileting.
  
  - (b) - COURT HOLDING AREA:

Holding cell B-117, across from the supervision hub station provides for cross gender viewing during toileting by both security staff and inmates being escorted to holding cells.
  
  - (c) - MAIN JAIL SOUTH CONTROL:

Holding tank #1 also provides direct cross-gender viewing during toileting. From the hallway, viewing goes directly to the cell toilet.

Holding cell #6 also provides cross-gender viewing during toileting. As custody staff enters the area the windows located door-side allow for direct viewing of inmates during toileting.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

#### Corrective Action Completion:

On 8/24/18, gency provided auditor with Directives from PREA Coordinator and photo verification of areas identified as non-compliant in standard provision 115.15(d) -



2 West Housing Unit: Directive P2018-07 dated 8/10/18, submitted and photo of directive posting sent to Eric via email 08/24/18 titled "Corrective Action: 115.15(d)". Directive states: Effective Sunday, August 12th, 2018, we will no longer use the 2nd West group shower, and restroom area for inmates. The 2nd West group shower is a PREA violation because it has been identified as a blind spot. The toilet is a PREA violation because it allows for cross-gender viewing. In order to become compliant with PREA standards, inmates housed in 2-5 through 2-16 will now take showers on night shift, in 2nd East.

A night shift Officer/Deputy will escort inmates housed in dorms 2-5 through 2-16 to 2nd East and allow them to shower in the various dorms on the right side of the tier which allows for privacy (239E; 240E; 241E; 242E) or you may also use the Ad Seg 2nd West and 2nd East Max single occupancy showers if sufficiently staffed.

While inmates are showering, an Officer/Deputy will stand by to ensure safety and security is enforced. The Officer/Deputy has discretion on the number of inmates taken to the shower at a time, so long as they ensure that only one inmate is allowed in each shower stall. Agency provided photos of 2nd, 4th, 5th, 6th, 7th and 8th floor violations as to verify corrective measures have been implemented. This includes the 2nd West cross-gender view toilet, photos of all directives correcting the non-compliant issues, holding cell B117, Court Holding Cell #1 and #6 in Main Jail South Control. 6th floor Custody level 3 & 4, Protective Custody Housing for male inmates.

6th Floor Housing Units -

Frosting workorder #10809306 doors on cells provide cross-gender opportunity for viewing inmates during toileting. Windows are located in middle of door and again in bottom of door, which allows central POD control deputy to view buttocks as inmates are toileting.

Court Holding cells -

Frosting workorder#10826803 photo of court holding cell B-117 and list of frosted areas

Main Jail South Control -

Photos and list of frosted areas to include mirror adjustments for holding tanks #1 and #6.

On 9/19/18, auditor conducted a 90-day onsite status review of the facility. During the physical plant review, auditor observed the Main Jail South 2-West shower/toilet area is closed per PREA Coordinator directive. Interview with inmates housed in 2-West indicate the shower and toilet area has been closed for a while. They have been escorted to shower in 2-East. Auditor viewed 2-East and found it to be PREA compliant. The 2-West shower is only to be used when an inmate has been pepper-sprayed and needs immediate medical attention to rinse the spray.

Main Jail South Control Holding Tank #6 has frosting on the door window. Recommend raising the frosting to 50 inches for tall staff and leaving a gap in the bottom of the frosting for short staff to view inmates for security purposes. The mirror that views the area has been re-positioned to observed the inmates. The camera views the holding tank but not the toilet area as verified by auditor observation of the camera views. Holding Tank #2 has window frosting which removes the chance of cross-gender viewing during toileting.

Main Jail North Court Holding area, Holding Cell B-117 has door window frosting which is PREA compliant and removes the chance of cross-gender viewing during toileting. The 6th floor custody level 3, 4 and protective custody housing units has frosting on all cell doors

which removes the chance of cross-gender viewing during toileting.

**Corrective Action Completion:**

On 8/24/18, agency provided auditor with Directives from PREA Coordinator and photo verification of areas identified as non-compliant in standard provision 115.15(d) regarding announcements -

PREA Coordinator Directive P2018-02 dated 7/25/18 accompanied by signed staff refresher training acknowledgments provided to auditor via email 08/24/18.

Cross-gender announcement directive dated 7/25/18 from PREA Coordinator to all custody staff and custody captains mandates:

The (5) points listed below have been previously mentioned through several administrative directives and located in policy 14.15. This is a reminder for staff to continue and follow the listed PREA requirements:

- YWCA Rape Crisis services are for the "Victims" of a PREA event; not the "Suspect"
- Refer both "Victim" and "Suspect" of a PREA event to Mental Health
  - o Document that you referred them in your Employee's report
  - o Write "PREA" on your Mental Health referrals for PREA events
  - o Attach copies of Mental Health referrals to your Employee's report
- Window frosting/privacy screens
  - o Infract inmates who tamper with window frosting/privacy screens
  - o Submit work orders to have missing covering/frosting replaced
  - o Log the work order in your log book
  - o Window frosting/privacy screens are a PREA mandate and not to be tampered
- ALL staff shall make a cross-gender announcement when entering a dorm/unit of the opposite gender.
  - o If someone of the opposite gender enters your dorm/unit make the announcement for them. i.e. "Female on deck" or "Male on deck"
- Elmwood Processing and Main Jail Intake staff: be sure to have the arrestee sign their rule book cover sheet
  - o If they refuse to sign, document on the cover sheet that they refused

On 9/19/18, auditor conducted a 90-day onsite status review of the facility. During the physical plant review of both Main Jail South and Main Jail North housing towers, auditor observed all staff making cross-gender announcements when entering the housing units. Not only did staff entering the housing units make announcements, at times, the staff at the control station in each housing unit also made announcements. Informal interviews with inmates housed in Main Jail South housing unit cells 205, 206, 201 and Main Jail North housing units A,B,C on both the 8th floor and 6th floor verified staff conduct cross-gender announcements on each shift. Review of the log book in each housing unit indicates housing officer makes notation when announcements are conducted.

Auditor has determined that agency meets all provisions of 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. 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.

115.16(c): PREA Policy 14.15, Custody ADA Plan Policy 13.11, and Mentally Disordered Inmates Policy 13.17, PREA Pamphlet in both English, Vietnamese & Spanish, PREA Posters in English, Vietnamese & 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 & TTY access for deaf & 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. There are no reported instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident's safety, the performance of first-response duties under §115.64, or the investigation of the resident's allegations over the past 12 months. Interview with a Random Sample of 17 staff indicates agency prohibits the use of inmate interpreters to interpret allegations of sexual abuse except in exigent circumstances. Staff must either use staff interpreter or obtain contract interpreter from medical, Shift Supervisor or intake/booking.

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.16.

115.17	<b>Hiring and promotion decisions</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 1485 443">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> <ul style="list-style-type: none"> <li data-bbox="252 499 1398 573">(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);</li> <li data-bbox="252 584 1485 701">(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</li> <li data-bbox="252 712 1469 786">(3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.</li> </ul> <p data-bbox="252 842 1437 1003">Auditor reviewed a random sample of 20 custody staff, selected from roster of all staff assigned to Main Jail for Shifts A thru d during the pre-audit phase. Records review verified that all 20 selected staff had both state and national background checks (DOJ and FBI) conducted and cleared prior to their hire date.</p> <p data-bbox="252 1059 1477 1301">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 data-bbox="252 1357 1485 1989">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 98 people who may have contact with inmates, which constitutes 100% of those hired over the past 12 months. 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.</p> <p data-bbox="252 2045 1485 2161">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</p>

background checks were conducted on 100% of the 1003 contractors that were hired during that period. Auditor conducted review of personnel records on random sample of 12 contractors selected from list of all contractors assigned to the Santa Clara County Main Jail. Records review determined that out of the 12 reviewed records, four had both a state and national background check clearance completed prior to their start date. Three records failed to reveal any background check prior to their start date. Six records indicated that national background checks were completed after the contractors' start date and two records indicated only state background checks were conducted and the clearances arrived after their start dates. Auditor has determined that based upon the random review, agency is not in compliance with Standard provision 115.17(d). Interview with a Human Resources administrator indicates the State background checks (CJIC) was always conducted and cleared prior to the contractor's start date. In January 2018, the backgrounds unit is required to obtain the FBI clearance prior to contractor's 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. 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 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.

115.17(h): PREA Policy 14.15 mandates that the agency shall provide information on substantiated allegations of sexual abuse, sexual misconduct or sexual harassment involving a former employee upon receiving a written request from an institutional employer for whom such person has applied for work. Interview with a Human Resources administrator indicates information to institutional employers upon receipt of a written consent signed by the former employee.

**CONCLUSION:**

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

**Corrective Action Recommended:**

1. Auditor to conduct a second review of personnel records on a random sample of contractors with start dates from 8/1/18 to 11/1/18 in order to verify compliance that national background checks are completed prior to the contractor start dates.

Auditor will conduct a 90-day status review on 9/26/18 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: 12/25/18.

**Corrective Action Completion 12/14/18:**

On 12/14/18, agency submitted personnel records on 10 contractors who have start dates between September and December 2018. All 10 contractors had completed background checks through CJIC/DOJ and FBI prior to their start dates. The practice of ensuring national background clearances were submitted and received prior to the contractor start date. This practice which occurred over a 4 month period of time verifies compliance with standard provision 115.17(d).

The agency/facility has met the requirements of Standard provisions 115.17(d), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and is in compliance 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 2015. 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): Agency has informed auditor that since last audit in 2015, the Main Jail has installed and updated the video monitoring system which includes addition of 600 cameras, upgrading the monitoring technology and memory storage to include body cameras for staff. Agency provided auditor with camera locations for both Main Jail South and Main Jail North. Interview with Facility Commander and Agency Head designee indicates agency spent 21 million dollars to install cameras in both Main Jail North and Main Jail South. This includes the body cameras for all custody staff. Auditor observed all staff possessing body cameras and was informed of the technology behind the body cameras and how cross-gender viewing by the body-cam is not an issue. The video technology is utilized to complement staff.</p> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.18.</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): Agency is responsible for conducting administrative and criminal sexual abuse investigations. PREA Policy 14.15 mandates use of uniform evidence protocol for sex abuse allegation investigations and outlines said protocol for Santa Clara County. Staff investigating allegations of sexual abuse 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. Policy 09.29 mandates that the Department of Correction is to ensure all crimes that occur in a facility or on the property of the Department are investigated and referred to the District Attorney's Office for consideration for prosecution. Interview with a random sample of 12 staff elected from list of all staff assigned to all four shifts during the onsite audit indicates agency conducts both criminal and administrative investigations. Custody and non-custody staff are required to follow their 1st Responder responsibilities which include separating victim and perpetrator in separate areas where they have no access to water and requested not to destroy usable physical evidence on their person. Seal the crime scene, contact their supervisor, medical/mental health staff. Jail Crimes Unit is notified to conduct the investigation. Staff carry 1st Responder reminder cards on their person which outlines the mandatory response in the event of a sexual abuse.</p> <p>115.21(b): PREA Policy 14.15 mandates use of uniform evidence protocol for sex abuse allegation investigations and outlines said protocol for Santa Clara County. Staff investigating allegations of sexual abuse 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.</p> <p>115.21(c): Policy 14.15 mandates victims of sexual abuse have access to forensic medical examinations without financial cost. Forensic examinations are conducted by SAFE/SANE nurses. Safe/Sane nurses are available through outside hospital facility (Valley Medical Center) contracted with the County 24/7. Policy also includes mandate that if SAFE/SANE nurse not available to conduct forensic examination, facility will document efforts to obtain SAFE/SANE nurse. No forensic medical exams have been conducted over the past 12 months. Auditor contacted the supervising SAFE/SANE/SART nurse at the Valley Medical Center and conducted a telephonic interview. The nurse indicated her program is responsible to conduct forensic examinations for inmate victims of sexual abuse from Santa Clara County adult and juvenile facilities. Specialized nursing staff are available 24/7 at the Valley Medical Center and forensic examinations are conducted in a private room in hospital emergency to enable quick access to resources. Forensic nurses contact YWCA for victim advocate per protocol. If the inmate indicates he/she does not want an advocate, one is provided in any event to assist with any explanation of procedures or sensitive questions that may be asked by the victim and provide emotional support in the event the victim changes his or her mind regarding the advocate's onsite presence. She recently reviewed the medical protocols for both juvenile and adult forensic examination procedures.</p> <p>115.21(d): Policy 14.15 mandates facility provide sex abuse victim an advocate from Rape</p>

Crisis Center (YWCA) or qualified staff member from Adult Custody Mental Health Services to provide emotional support, crisis intervention, information and referrals as necessary. Agency provided YWCA Rape Crisis Center MOU active from 7/1/15 to 6/30/18 which provides for emotional support, victim advocacy and reporting. Interview conducted with the PREA Compliance Manager indicates YWCA Rape Crisis Advocates meet victim at the hospital and remains as long as the inmate wants the advocate. Jail Crimes Unit is responsible for contacting a victim advocate from the YWCA is a component of the Coordinated Response. SANE/SART nurse also contacts YWCA for a victim's advocate once the inmate arrives at the hospital in the event an advocate is not with him/her. Interview with YWCA director corroborates this statement.

Only one inmate who reported a sexual abuse was housed in the Main Jail facility. This inmate indicated that when he reported a sexual abuse, the facility immediately referred him to mental health for a review and emotional status and conducted an investigation. Mental health records corroborates inmate's statement. Review of the investigation indicated the case was unfounded due to inconsistencies in the inmate's statements and lack of witnesses.

115.21(e): Policy 14.15 mandates if requested by victim the advocate or Alameda County Health Services (ACHS) Mental Health Staff member shall provide support to victim throughout the medical examination process. Interview conducted with the PREA Compliance Manager indicates YWCA Rape Crisis Advocates meet victim at the hospital and remains as long as the inmate wants the advocate. Jail Crimes Unit is responsible for contacting a victim advocate from the YWCA is a component of the Coordinated Response. SANE/SART nurse also contacts YWCA for a victim's advocate once the inmate arrives at the hospital in the event an advocate is not with him/her. Interview with YWCA director corroborates this statement. Only one inmate who reported a sexual abuse was housed in the Main Jail facility. This inmate indicated that when he reported a sexual abuse, the facility immediately referred him to mental health for a review and emotional status and conducted an investigation. Mental health records corroborates inmate's statement. Review of the investigation indicated the case was unfounded due to inconsistencies in the inmate's statements and lack of witnesses.

115.21(f): N/A - Standard provision 115.21(f) does not apply to this facility as it is responsible for both administrative and criminal investigations.

115.21(g): Auditor is not required to audit standard provision 115.21(g).

115.21(h): Auditor is not required to audit standard provision 115.21(h).

**CONCLUSION:**

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): PREA Policy 14.15 mandates agency to ensure administrative or criminal investigations are completed for all allegations of sex abuse &amp; sex harassment. Agency reports that in past 12 months, a total of 8 sex abuse &amp; sex harassment allegations were received. Out of the 8 total number of allegations of sexual abuse/harassment received, 2 resulted in administrative investigations and 6 were referred for criminal investigation. 5 cases were investigated as sexual harassment allegations and 3 cases were investigated as sexual abuse allegations. All investigations have been completed. Pre-audit phase review of all 8 cases provided by agency verify compliance with this Standard provision 115.22(a). Interview from Agency Head designee indicates that all administrative and criminal investigations are completion for all allegations of sexual abuse and sexual harassment. Jail Crimes Unit detectives are assigned to conduct complete sexual abuse and sexual harassment investigations. 13 detectives are certified to conduct investigation of sexual abuse in a confinement setting. Review of training records corroborates this statement as all identified special investigators possess NIC certification to conduct sexual abuse investigations in a confinement setting.</p> <p>115.22(b): Policy 14.15 mandates sex abuse/sex harassment allegations be referred for investigation with agency with legal authority to conduct criminal investigations. Santa Clara County Sheriff's office conducts its own criminal investigations. Policy 09.29 mandates that the Sheriff's Department of Corrections is responsible for reporting and investigating crimes. Agency's investigation policy as it relates to sexual abuse/harassment allegations is posted on the Agency website. The agency documents all referrals of sexual abuse/harassment for administrative and criminal investigations. Auditor reviewed all 8 sexual misconduct investigations that occurred over the past 12 months and all were documented. Policy 14.15 mandates sex abuse/sex harassment allegations be referred for investigation with agency with legal authority to conduct criminal investigations. Santa Clara County Sheriff's office. Auditor interviewed five investigative staff comprised of two criminal investigators from the Jail Crimes Unit, two Administrative investigators from Internal Affairs and one investigator from Major Crimes Unit. All responded that all allegations of sexual abuse and sexual harassment are referred to the Jail Crimes Unit to conduct criminal investigations and referred to Internal Affairs for administrative investigations.</p> <p>115.22(c): N/A - Agency is responsible for conducting both administrative and criminal investigations.</p> <p>115.22(d): Auditor is not required to audit Standard provisions 115.22(d).</p> <p>115.22(e): Auditor is not required to audit Standard provisions 115.22(e).</p> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.22.</p>



<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.31(a): PREA Policy 14.15 mandates all staff including contractors &amp; volunteers responsible for supervision inmates or who may come in contact with inmates will receive PREA training. Custody staff Academy Training for PREA includes the 10 criteria identified in Standard provision 115.31(a) is included in the policy. PREA refresher training rosters, Orientation and Employee handouts were provided to auditor and covers all criteria outlined in Standard provision 115.31(a). Documentation covers Zero Tolerance, Inmate rights, Reporting, Effective Communication and Sexual Harassment. Training Power-point is the complete PREA Training platform for Employee Education. Agency provided Auditor with New PREA Employee handout which outlines Zero Tolerance policy &amp; provides acknowledgement page to be signed by new employee and submitted to PREA Coordinator for tracking, training rosters for sexual abuse, sexual harassment and cross-gender training for 48 agency employees who were hired over the past 12 months. Prior to the on-site review, auditor was provided electronic PREA training records, to include sign-in sheets and acknowledgement forms for all custody staff. Training acknowledgement forms were provided for all volunteers, contractors, medical &amp; mental health staff. Agency provided auditor with the PREA I and PREA II refresher power-point training which includes topics such as inmate rights under PREA, potential issues of sexual misconduct, sexual abuse and sexual harassment, red flag warning signs of sexual misconduct and sexual abuse of inmates, inappropriate relationships with inmates, characteristics of inmate sexual predators and potential victims, actions required in responding to and reporting an allegation of sexual abuse, methods of inmate reporting or sexual abuse. Interview with a random sample of 17 staff selected from a list of all four shifts assigned to work during the onsite audit indicates they have all received PREA training either in the academy or refresher training during end of 2017 or beginning of 2018 to include cross-gender supervision training. Training power-points and sign in rosters provided by agency corroborates this statement. Review of training components also verify compliance with this standard provision.</p> <p>115.31(b): Policy 14.15 mandates PREA training shall be tailored to the gender of the inmates at the employee's facility. If employee is reassigned from a facility that houses only male inmates to one that houses only female inmates or visa-versa, that employee shall receive additional training. Review of 20 randomly selected staff training files indicate staff are trained to work in both male and female facilities. Main Jail has two co-ed housing units and the other two facilities house either only mail inmates or female inmates. All randomly selected Main Jail staff recently attended cross-gender supervision, PREA I and PREA II and LGBTQI refresher training as verified by review of training records by auditor.</p> <p>115.31(c): Agency indicates that 100% of staff currently employed by the facility, who may have contact with inmates, who were trained or retrained in PREA requirements. Between trainings, the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment. Review of electronic training records verify their statements. Refresher PREA training is provided bi-annually as verified with review of training sign-in rosters and randomly selected sample of 22 staff from roster of all workers assigned to Santa Clara County Main Jail, 6 contractors and 8</p>

volunteers, selected from roster of all contractors and volunteers assigned agency wide, which totaled 2124. The review verified that records of all classes that were reviewed received refresher training in 2017 and new staff employees received both initial training in the correctional officer academy or during orientation and refresher training in 2017.

115.31(d): Agency provided auditor with electronic training verification rosters for employees who participated in the PREA sexual abuse and sexual harassment training to include refresher training. This type of training is computerized and the rosters include the date each employee took the training. Random sample of 6 contractors and 8 volunteers selected from roster of all contractors and volunteers assigned agency wide, which totaled 2124 included signed orientation and PREA training acknowledgement forms for all.

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.31.

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 all staff, volunteers &amp; contractors who have contact with inmates be trained in PREA. Agency provided Auditor with copy of the New PREA Contractors &amp; Volunteers handout which provides for Zero-Tolerance Policy, definitions of sexual misconduct, reporting methods for sexual misconduct, confidentiality and acknowledgement page to be completed by contractors &amp; volunteers after training to be submitted to PREA Coordinator. Agency reports 1003 volunteers and contractors have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Review of training records of a random sample of 12 contractors and 8 volunteers selected from roster of all contractors and volunteers assigned agency wide, which totaled 2124. Agency provided auditor with copies of volunteer &amp; contractor training records and acknowledgment of understanding which was included in each training file reviewed. Policy 14.15 pg 18 &amp; 19 B. also mandates the PREA training shall at a minimum consist of the topics outlined in standard provision 115.31(a) criteria 1 through 10. Agency has not provided auditor with acknowledgements of training for contractors and volunteers, based upon their level of contact they have with inmates, to verify they have received any PREA training beyond the New PREA Employee handout.</p> <p>115.32(b): Policy 14.15 mandates all staff, volunteers &amp; contractors who have contact with inmates be trained in PREA. Agency provided Auditor with copy of the New PREA Contractors &amp; Volunteers handout which provides for Zero-Tolerance Policy, definitions of sexual misconduct, reporting methods for sexual misconduct, confidentiality and acknowledgement page to be completed by contractors &amp; volunteers after training to be submitted to PREA Coordinator. Agency reports 1003 volunteers and contractors have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Review of training records of a random sample of 12 contractors and 8 volunteers selected from roster of all contractors and volunteers assigned agency wide, which totaled 2124. Agency provided auditor with copies of volunteer &amp; contractor training records and acknowledgment of understanding which was included in each training file reviewed. Policy 14.15 pg 18 &amp; 19 B. also mandates the PREA training shall at a minimum consist of the topics outlined in standard provision 115.31(a) criteria 1 through 10. Agency has not provided auditor with acknowledgements of training for contractors and volunteers, based upon their level of contact they have with inmates, to verify they have received any PREA training beyond the New PREA Employee handout.</p> <p>115.32(c): Random sample selection of 6 contractors and 8 volunteers selected from roster of all contractors and volunteers assigned agency wide, which totaled 2124. Reviewed files included signed orientation and PREA training acknowledgement forms for all 1003 who are assigned to the Main Jail facility.</p> <p><b>CONCLUSION:</b> Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.32(a) and 115.32(b), corrective action is required.</p>

Corrective Action Recommended:

1. Agency to provide either signed or electronic acknowledgements of a random sample of contractors and volunteers hired from 8/1/18 to 11/1/18, based upon their level of contact, that they have completed PREA training beyond the New PREA Employee handout.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

Corrective Action Completion 12/28/18:

On 12/20/18, auditor reviewed the training rosters and acknowledgements of contractors and volunteers who have been hired between October and December 2018 submitted by agency. The contractors and volunteers attended PREA training between 10/9/18 and 12/14/18. The training rosters and acknowledgements verify their PREA training.

The agency/facility has met the requirements of Standard provisions 115.32(a) and 15.32(b), completed during the corrective action period. The auditor has determined that the agency/facility has met all standard provisions and is in compliance with Standard 115.32.



<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.33(a): Inmates are provided Inmate Sexual Assault Awareness pamphlets at intake which are printed in English, Spanish and Vietnamese for effective communication. The pamphlet outlines the Department's Zero Tolerance policies on both sexual harassment and acts of sexual violence. Reporting options are outlined. At the intake desk, a laminated poster affixed to the Classification desk outlines Inmate Rights under PREA. All inmates are required to read the Comprehensive Education poster to determine understanding of their rights and English proficiency or other disability that may hinder effective communication. All PREA communications, both written and verbal, will provide effective communication and understanding for disabled and non-English speaking inmates. Agency reports that over the past 12 months 28306 inmates (100%), were provided this information at intake. Interview with female booking/intake staff indicate female inmates are provided information regarding zero-tolerance and how to report incidents or suspicions of sexual abuse at intake/booking through the Inmate Handbook and the Sexual Awareness Pamphlet (available in three predominant languages). The inmate then signed the PREA education acknowledgement. Interview with the female booking staff indicates they ask the inmate questions to ensure the inmate understands the zero-tolerance policy and reporting procedures. Interview with male booking/intake staff indicate inmates receive information about zero-tolerance and how to report incidents or suspicions of sexual abuse at intake/booking through the Inmate Handbook and the Sexual Awareness Pamphlet (available in three predominant languages). Inmate then signs acknowledgement that he received and understands the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The inmate is then provided their right to be free from sexual abuse and sexual harassment at classification as they are required to read this information back to the classification officer at the Classification station. Classification requires this to ensure inmate can read and comprehend the information. Informal interview with intake staff indicates there is no initial screening process during booking to determine if an inmate can read or not. Interview with random sample of 24 inmates indicate 19 inmates received both the Sexual awareness Pamphlet and Handbook at booking, however, only five read either of the documents.</p> <p>115.33(b): Agency reports that over the past 12 months 2176 inmates (100%), received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. During the pre-audit phase, auditor requested roster of all inmates assigned to Santa Clara County Main Jail facility for records review. Upon receipt of the roster which consisted of 761 inmates, auditor made a random selection of 24 inmates for document review. Review of the classification records indicated four inmates missing signed PREA acknowledgments, three inmates missing initial PREA training, four inmates missing PREA comprehensive training entries in electronic system, three inmates missing 30-day reassessments. Interview with male booking/intake staff indicate inmates see the PREA video in booking/intake to obtain their comprehensive education prior to being housed. Interview with female booking/intake staff indicate that female inmates who are to be assigned at Main Jail are seated in the waiting room to view the PREA video prior to being housed. Inmates pending transport to Elmwood Women's facility are held</p>

in holding tanks, unable to see the PREA video. Once transported to Elmwood Women's facility, usually within four hours, they arrive at Elmwood's processing station where they must view the PREA video prior to being housed. Auditor observed multiple televisions in Processing at Elmwood playing the PREA video in a loop for all new arrivals. Interview with random sample of 24 inmates indicate none of the inmates saw the PREA video in booking. A few of them reviewed the video in their Main Jail housing units which is on a loop once a week and they informed the auditor of the time played and television channel.

Observation of the intake/booking area during the onsite audit indicated there are two large televisions in booking. Only one television works and is located behind the inmates seated in the waiting area awaiting classification. Inmates in holding tanks one through four and B82 to B87 cannot see the PREA video television, closed captions or hear it. The second television has not worked for over a month. Informal interview with booking staff indicates facility is waiting for a part to arrive for the television. Observation in the classification area noted one large television in holding tank B-49, which is located across from the classification desk. None of the inmates in the holding tanks are able to see the PREA video on the one television.

115.33(c): Review of the randomly selected classification records indicated four inmates missing signed PREA acknowledgments, three inmates missing initial PREA training, four inmates missing PREA comprehensive training entries in electronic system, three inmates missing 30-day reassessments. Out of the inmates missing initial PREA education and comprehensive education, there was no documented verification that there was follow-up to provide PREA education. Interview with intake staff indicate all inmates are provided PREA education at intake/booking through the PREA Handbook, Sexual Awareness Pamphlet for initial PREA education and PREA video played on a loop for comprehensive education prior to the inmate being housed.

115.33(d): Policy 14.15 mandates 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 interpreter contractors are also made available. PREA inmate education pamphlets are provided in English, Spanish and Vietnamese and PREA video is provided with closed caption for otherwise disabled inmates. Agency provides 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. 20 minute Comprehensive Education Video provided to auditor for review.

115.33(e): The agency maintains documentation of inmate participation in PREA education sessions through entry into the Jail Management electronic system Classification Notes and signed acknowledgements are maintained in the inmate records which are maintained by the Classification Units.

115.33(f): PREA inmate education pamphlets are provided in English, Spanish and Vietnamese and PREA video is provided with closed caption for otherwise disabled inmates. The video is played during intake and again weekly in the housing unit. PREA posters are available in general areas of each housing unit and areas outside the housing unit that inmates have access to. During the onsite physical plant review, auditor noticed PREA posters in all Main Jail South hallways and in housing units except for the units located on the 8th floor. Interview with 17 random sample of inmates indicate that only a few housing units play the PREA video in a loop once a week. Main Jail North has PREA posters outside each housing dorm and cell. PREA video is not played at Main Jail North.

#### CONCLUSION:

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.33(a), 115.33(b), 115.33(c) and 115.33(f). Corrective action is required.

#### Corrective Action Recommended:

1. Agency to create and implement a system in intake/booking which identifies an inmate's reading skills prior to having him/her acknowledge the PREA education.
2. Agency to ensure each inmate sign dated acknowledgements for their initial PREA education and have procedures in place to ensure and verify each inmate has completed his/her comprehensive education within 30-days of intake. Agency to train intake/booking and classification staff to ensure they understand these procedures and acknowledge understanding that the training has been provided.
3. Agency to make the televisions with PREA education on them accessible to all inmates during the booking process or create a system to provide PREA education, initial and comprehensive to all inmates regardless of classification or placement.
4. Inmates who either refuse or are unable to participate initial or comprehensive PREA education due to illness or inebriation should be provided second opportunity to be provided said education. Agency to create a system to ensure all inmates have access to initial and comprehensive PREA education.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

**Corrective Action Completion:**

On 9/19/18, auditor conducted a 90-day onsite status review of the facility. Interview inmates for when PREA video plays in housing unit

Informal interviews of inmates and all three pods for the eight and six floor were asked when the PREA video was played in the housing units. Inmates verified that the PREA video is played on the eighth floor between 9 o'clock and 10 o'clock every morning. Inmates housed on the sixth floor indicated the video was played once a week. The auditor reviewed the housing unit log on the eighth floor and found the log was the annotated correctly. On the six floor the housing unit log was annotated periodically in two of the three PODs.

On 9/19/18, auditor conducted a 90-day onsite status review of the facility auditor conducted Booking staff was interviewed and walked the auditor through the booking process. Inmate is first cleared through medical which determines physical disabilities and reads medical questions in a sound booth. The booking process included determining the inmate's reading ability by having them read the initial PREA education, posted in three languages, on the counter of the booking sound booth. Inmates read the statements to the booking officer. If the inmate has difficulty, the booking officer will read to him/her. Inmates can ask the booking officer questions at that time regarding Zero-tolerance and reporting allegations of sexual abuse. Inmate is asked if he/she has experienced sexual abuse and asks other safety questions. Booking staff then provides inmate with the inmate handbook and Sexual Awareness Pamphlet which has the YWCA hotline number on the back. Staff has inmate sign an acknowledgement for receipt of the documents and initial education.

Classification staff interviewed regarding their role in the PREA education process. Once the booking process is completed, the inmate moves to the Classification area. Classification staff initially has the inmate read the initial PREA education, posted in three languages, on the counter of the booking booth, same as booking, to determine disabilities such as reading or cognitive issues. Inmate reads the statement out loud to the Classification officer and has the opportunity to ask questions. If the inmate cannot read, the disability box is checked on the PREA questionnaire and inmate is referred to medical for assistance. Medical, for inmate with disability classification, reads the inmates their rights and methods of reporting allegations of sexual abuse. This includes providing the location of the YWCA Hotline number. Classification officers also assist inmates with answering questions and reading the PREA information to them to provide effective communication. Inmate is then asked PREA questions in a confidential area such as the interview cell next to the Sergeant's office or the mental health office. All information is documented in classification notes. Auditor verified compliance through viewing a random selection of inmate classification notes to ensure initial and comprehensive education was being documented in the JMS system.

Informal interviews of inmates and all three pods for the eight and six floor were asked when the PREA video was played in the housing units. Inmates verified that the PREA video is played on the eighth floor between 9 o'clock and 10 o'clock every morning. Inmates housed on the sixth floor indicated the video was played once a week. The auditor reviewed the housing unit log on the eighth floor and found the log was the annotated correctly. On the six floor the housing unit log was annotated periodically in two of the three PODs. Review of 8th and 6th floor housing PODs, auditor determined inmates do not have access to the televisions from their cells due to mandated ADA stair well construction. The inmates are to view the video during their program time. There is no protocol to ensure this is occurring.

On 11/15/18, the PREA Coordinator submitted directive P2018-03, addressed to all custody staff, which outlines the following mandate regarding PREA comprehensive training video in the housing units which requires all inmates to view within 30 days of intake:

The PREA and Inmate Orientation Videos shall be played daily from 0900-1000 and 2100 - 2200 hours to ensure inmates receive their "comprehensive education" as required by PREA standards.

At 0900 and 2100 hours, daily including weekends, televisions will be turned to channel 12. Deputies are to keep the remotes for this time period, and note in the log book that the video was played. As a reminder, Control Deputies will make a 0900 and 2100 announcement for staff.

During the 9/19/18 90-day onsite status review of the facility, auditor observed the two televisions located in the holding area of intake/booking showing PREA video with closed caption in English, Spanish and Vietnamese. The only inmates unable to see the television are those in 6 holding cells. PREA video is made available for those inmates in the housing units where the video is played at 9am daily. There is also a television in the Felony holding tank outside of Classification where inmate await housing assignments. This television also plays PREA video with the closed caption.

During the 9/19/18 90-day onsite status review of the facility, auditor interviewed Booking staff who indicated when inmates do not have the capacity to participate in the intake/booking process, the medical staff is alerted and the inmate is kept in the intake/booking area until they are able to participate. Should the inmate refuse to sign the acknowledgement for receipt of the Inmate Rule Book, Sexual Awareness pamphlet and education, the intake/booking staff indicates "refuses to sign" on the acknowledgment form and dates the notation. Inmates are not disciplined for failure to participate in the intake/booking process.

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.33.

<b>115.34</b>	<b>Specialized training: Investigations</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 1485 1043">115.34(a): PREA Policy 14.15 mandates Where sexual abuse is alleged, the investigation shall be conducted by Jail Crimes Investigations (JCI) Unit investigators that have received special training in sexual abuse investigations in confinement settings. Review of all 8 PREA investigations determined that 7 of the investigations were investigated by JCI investigators with the NIC certification to investigate sexual abuse cases in a confinement setting. Training for all investigators is through NIC. The investigator for Case #47 did not possess the required certification while conducting the sexual abuse investigation in March 2017. Agency provided auditor with NIC curriculum. Separate interviews with two criminal, two administrative and one major crimes investigative staff indicates all 13 assigned special investigators from the Jail Crimes Unit (JCU) are certified to conduct sexual abuse investigations in a confinement setting through NIC. Auditor review of training files determined that all 13 investigators possess the proper certification. Internal Affairs does not conduct sexual abuse investigations, neither does major crimes. Internal Affairs tolls the case until JCU closes the case. Internal Affairs uses the investigative evidence and report to investigate staff policy violations only. Once JCU has conducted its investigation and determines it to be a serious crime, major crimes may take the case to the District Attorney's Office for prosecution, but does not conduct any sexual abuse investigation.</p> <p data-bbox="252 1099 1481 1429">115.34(b): Training for all investigators is through NIC has been deemed PREA Compliant as they provide training in 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. NIC Curriculum provided by Agency. Separate interviews with two criminal, two administrative and one major crimes investigative staff indicates they recall major topics of their training except for Internal Affairs investigators who do not conduct sexual abuse investigations.</p> <p data-bbox="252 1485 1453 1688">115.34(c): Agency has identified 13 investigators for sex abuse cases. Agency provided auditor with 13 investigator names during the pre-audit document review phase. 13 NIC special investigator certificates were provided. One of the investigators was transferred from the JCI unit in 2017 and is no longer a JCI investigator. The NIC certificate certifies investigators to investigate sexual abuse allegations in a confinement setting.</p> <p data-bbox="252 1744 1182 1778">115.34(d): Auditor is not required to audit standard provision 115.34(d).</p> <p data-bbox="252 1834 1437 1946"><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.34.</p>

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35(a): PREA Policy 14.15 mandates that all staff, including contractors and volunteers responsible for supervising inmates or whom 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 10 criteria topics outlined in PREA standard provision 115.31(a). Medical and mental health staff are contractors. Agency indicates there are 167 (100%) medical and mental health care practitioners who work regularly at this facility who received the training. Auditor reviewed 6 medical and mental health contractor training files selected from the list of contractors assigned to the Santa Clara County Main Jail facility. Review of the files and signed training acknowledgements verified that all but one completed the initial PREA training which includes Zero-Tolerance and methods of reporting allegations of sexual abuse and sexual harassment prior to start dates, and the PREA 1 and PREA II comprehensive training after employment start date. Interview with medical and mental health staff indicates they are both contractors and are required to complete additional PREA training from Santa Clara County medical. Staff also complete the Santa Clara County jail PREA I sexual abuse/sexual assault, PREA II sexual harassment and 2 hour refresher electronic training sessions. Review of medical and mental health electronic training records and sign-in sheets verify compliance.</p> <p>115.35(b): N/A - Medical staff at this facility does not conduct forensic examinations.</p> <p>115.35(c): The agency maintains documentation showing that medical and mental health practitioners have completed the required training. Verified by the list of all medical and mental health contract practitioners provided auditor from which 6 random medical and mental health contractor files were selected.</p> <p>115.35(d): PREA Policy 14.15 mandates that all staff, including contractors and volunteers responsible for supervising inmates or whom 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 10 criteria topics outlined in PREA standard provision 115.31(a). Medical and mental health staff are contractors. Interview with medical and mental health staff indicates they are both contractors and are required to complete additional PREA training from Santa Clara County medical. Staff also complete the Santa Clara County jail PREA I sexual abuse/sexual assault, PREA II sexual harassment and 2 hour refresher electronic training sessions. Review of medical and mental health electronic training records and sign-in sheets verify compliance.</p> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant 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): PREA Policy 14.15 mandates PREA requires that all those detained or incarcerated (for citable or non-citable offenses) be screened for a history of sexual assault, sexual abuse or rape at intake. History of sexual abuse or rape includes events both in and out of a custody setting. It is not exclusive to custody environments. All inmates shall be assessed during an intake screening, Classification interview and upon transfer to another facility for their risk of being sexually abused 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 classification staff indicates inmates are screened upon admission to a facility or transferred to another facility with a different mission or gender type for risk of sexual abuse victimization or sexual abusiveness toward other inmates. Interview with a random sample of 24 inmates auditor selected from list of Main Jail inmates provided by agency indicates recalling being asked questions such as if they had history of sexual abuse, gender identity and if they feel safe from sexual abuse in this facility.</p> <p>115.41(b): Agency states that inmates are screened within five to eight hours of booking. Over the past 12 months 17774 inmates entering the facility (either through intake or transfer) whose length of stay in the facility was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the Santa Clara County Main Jail facility. This constitutes 100% of inmates entering the facility over the past 12 months. Auditor obtained a list of all inmates assigned to Santa Clara County Main Jail during the pre-audit phase. Auditor made random selection of 20 inmate screening files, at least one from each housing unit. Auditor determined that out of the 20 inmate screening files, all 20 inmates received their initial screening within 1 day of intake. Interview with classification staff indicates all inmates are screened on date of booking unless they are under the influence of drugs or inebriated. If so, they are given the opportunity to be able to understand the information provided before completion of the screening, usually within 24 hours. Interview with a random sample of 24 inmates auditor selected from list of Main Jail inmates provided by agency indicates they received their screening on date of booking/intake.</p> <p>115.41(c): Auditor obtained a list of all inmates assigned to Santa Clara County Main Jail during the pre-audit phase. Auditor made random selection of 20 inmate screening files, at least one from each housing unit. During review of the screening files, agency utilized an objective screening instrument and uploaded the instrument to the Jail Management System with classification notes included. Auditor review of risk assessment screening instrument, Supplemental PREA Worksheet, determines the instrument is not objective. The instrument is not weighted to determine the inmate's risk of victimization or predation. Additionally, the classification staff rarely provide narrative explanation when an inmate responds YES to any of the sensitive PREA questions. Classification staff rarely provide narrative in the Classification Summary and Risk Assessment for Sexual Abuse section of the Supplemental PREA Worksheet. Review of classification notes in the JMS computerized system reads like a cut and paste narrative which indicates the assessments are not individualized.</p> <p>115.41(d): Both the classification assessment sheet and supplemental PREA assessment</p>



worksheet contained the 10 criteria outlined in standard provision 115.41(d). This is corroborated through auditor review of both of the screening sheets and interview with classification staff.

115.41(e): Both the classification assessment sheet and supplemental PREA assessment worksheet contained the 10 criteria outlined in standard provision 115.41(d). Interview with classification staff indicates the initial screening instrument considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. Review of instrument by auditor verifies the questions are a component of the document.

115.41(f): PREA Policy 14.15 mandates that each inmate 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 classification staff indicates inmates are reassessed within 30 days of intake. Interview with a random sample of 17 inmates auditor selected from list of Main Jail inmates provided by agency indicates they do not remember having any additional questions asked related to PREA after their initial intake or classification meeting. Review of a random selection of 20 inmate classification notes indicate reassessments have been conducted within 30 days of intake for 17 of the 20 classification notes reviewed, equating to an 85% success rate.

115.41(g): PREA Policy 14.15 mandates that each inmate 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 noted that the 30-day PREA reassessment reviews began on 11/15/16 after a directive was submitted to all classification staff from the Classification Captain describing the reassessment procedures under PREA requiring that all inmates are to be reassessed within 30-days of intake. The Jail Management System will initially flag the inmate on the 25th day following intake and classification is to prioritize reassessments from the 25th day. Another flag is issued on the 31st day indicating that the 30-day deadline for reassessments has expired. Auditor requested listing of all inmates currently assigned to Santa Clara County Main Jail facility with intake on or after 11/15/16 to make a random selection of inmates for document review. Upon review of 20 randomly selected inmate screening files auditor discovered agency provided two inmates who had intake prior to 11/15/16 which left 18 viable screening files. Out of the 18 viable files only one was deemed non-compliant. Interview with classification staff indicates they conduct interviews, look at any behavioral reports or informational reports generated by staff and conduct a complete review of the classification file in the event any medical or mental health notes have been generated. Interview with a random sample of 24 inmates auditor selected from list of Main Jail inmates provided by agency indicate that some have been reclassified due to additional information regarding behavior within 30-days of intake. Review of classification notes verify their statements.

115.41(h): PREA Policy 14.15 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. Out of the 20 screening files reviewed by auditor, three inmates refused to answer PREA questions and they were not disciplined in any manner, which verifies agency compliance with standard provision 115.41(h). Interview with classification staff indicates inmates are not disciplined for refusal to answer questions or not disclosing complete information in response to, questions asked regarding sexual victimization or abusiveness.

115.41(i): Interview with PREA Coordinator, PREA Compliance Manager and Classification staff indicates that inmate screening files are maintained in the Classification Unit and are secured. Access is provided on a need-to-know basis under the supervision of a classification officer. The Jail Management System classification section is accessible only to upper level staff, watch commander and above. During the onsite physical plant review, auditor observed the classification desk operations. While sensitive PREA questions are being asked of inmates, there may be from two to four inmates seated at each station and no sound barriers between stations as there are in booking/intake. Additionally, anyone walking behind the inmate in the corridor between classification and holding tanks may also overhear inmate's response to sensitive information.

#### CONCLUSION:

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

#### Corrective Action Recommended:

1. Agency to create an objective screening instrument that is objective and weighted to determine the inmates' risk of victimization or predation. An alternative would be to maintain the current screening instrument and train intake and classification staff to include written narrative explanation for all areas in the Supplemental PREA Worksheet where the inmate answers "YES" to the questions. Intake and classification staff must also include a written narrative in the Classification Summary and Risk Assessment for Sexual Abuse section which provides the analysis and reasoning behind inmates' housing and programming placement.
2. Agency to provide sound barriers or another form of barrier which provides confidentiality during PREA risk screening so responses to sensitive questions are not overheard by other inmates or staff who does not have a need to know. This type of barrier is provided in booking/intake. An alternative is to provide a confidential space or office to conduct the classification PREA screening process to provide a secure area for confidentiality purposes.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

#### Corrective Action Completion:

During the 9/19/18 90-day onsite status review of the facility, auditor interviewed Classification staff regarding their role in the PREA education process. Once the booking process is completed, the inmate moves to the Classification area. Classification staff initially has the inmate read the initial PREA education, posted in three languages, on the counter of the

booking booth, same as booking, to determine disabilities such as reading or cognitive issues. Inmate reads the statement out loud to the Classification officer and has the opportunity to ask questions. If the inmate cannot read, the disability box is checked on the PREA questionnaire and inmate is referred to medical for assistance. Medical, for inmate with disability classification, reads the inmates their rights and methods of reporting allegations of sexual abuse. This includes providing the location of the YWCA Hotline number. Classification officers also assist inmates with answering questions and reading the PREA information to them to provide effective communication. Inmate is then asked PREA questions in a confidential area such as the interview cell next to the Sergeant's office or the mental health office. Auditor reviewed the revised supplemental screening instrument. The instrument is objective and weighted to determine the inmate's risk of victimization or predation. Classification staff is mandated to provide a narrative in the body of the summary whether the inmate is at risk to be a victim or predator of sexual abuse unless the "NO RISK" box is checked.

Auditor has determined that agency has met all provisions of standard 115.41.

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.42(a): Policy 14.15 mandates information from the risk screening required by standard 115.41 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. Interview with PREA Compliance Manager indicates classification unit houses inmates accordingly to keep inmates safe from predators. Protective Custody or restrictive housing is utilized to keep predators and victims separate. Interview with classification staff indicates risk screening is utilized to separate predators and potential predators from victims or potential victims and house appropriately.</p> <p>115.42(b): Policy 14.15 mandates 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. The Risk Screening Instrument information is considered to inform for housing and programming with the goal of inmate safety in mind. Interview with classification staff indicates risk screening is utilized to separate predators and potential predators from victims or potential victims and house appropriately</p> <p>115.42(c): PREA Policy 14.15 mandates that in order to ensure proper housing for transgender, intersex, lesbian, gay and bisexual 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. Interview with PREA Compliance Manager indicates agency determines housing and program assignments through the use of inmate statement of preference form as outlined in the agency LGBTQI policy. Classification makes determinations based upon the response made by inmate on the form. Interview with Transgender inmate indicates staff did not ask her questions about her safety or asked her preference on housing placement. Auditor review of the LGBTQI interview documentation indicates the inmate was “out of it” during booking and classification intake and she does not remember the experience. Inmate suffers from PTSD and other mental health issues and was initially placed in the mental health unit for observation before being transferred to a Protective Custody unit.</p> <p>115.42(d): PREA Policy 14.15 mandates that placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. Interview with PREA Compliance Manager and classification staff indicates Transgenderers are reassessed twice a year per policy.</p> <p>115.42(e): PREA Policy 14.15 mandates that a transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration. Interview with classification staff and PREA Compliance Manager indicates the statement of preference form is completed by inmate and classification utilizes the response to determine housing and programming placement. Interview with Transgender inmate indicates staff did not ask her questions about her safety or asked her preference on housing placement. Auditor review of</p>

the LGBTQI interview documentation indicates the inmate was “out of it” during booking and classification intake and she does not remember the experience. Inmate suffers from PTSD and other mental health issues and was initially placed in the mental health unit for observation before being transferred to a Protective Custody unit.

115.42(f): PREA Policy 14.15 mandates that transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Interview with classification staff and PREA Compliance Manager indicates Transgender inmates are provided medical privacy screens in the housing units for dignity and privacy during showering or during any portions of undress to eliminate cross-gender viewing. Interview with Transgender inmate indicates She is provided opportunity to shower separately from other inmates in the housing unit. Medical privacy screens are provided and the windows to the showers are frosted.

115.42(g): PREA Policy 14.15 mandates that the agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates. Interview with classification staff and PREA Compliance Manager and PREA Coordinator indicates agency does not possess dedicated facilities units, or wings solely on the basis of identification or status as LGBTI. Interview with Transgender inmate indicates at no time was she housed in a dedicated facility, unit or wing solely on identification of her Transgender status.

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.42.

115.43	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.43(a): PREA Policy 14.15 mandates that inmates at high risk for sexual victimization shall not be placed 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. Inmates may not be held in involuntary segregated housing for more than 24 hours pending assessment for permanent housing. Agency indicates that 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 agency policy prohibits placement of 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.</p> <p>115.43(b): PREA Policy 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. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:</p> <ol style="list-style-type: none"> <li>(1) The opportunities that have been limited;</li> <li>(2) The duration of the limitation; and</li> <li>(3) The reasons for such limitations.</li> </ol> <p>Agency indicates that 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 staff who supervises inmates in segregated housing indicates inmates placed in segregated housing for purposes of separation of likely abusers have access to programming such as group programs and education during the day shift to include chaplain visits. They also have access to out of cell or out-alone time either based upon their safety requirements. Interview two inmate placed in segregated housing for risk of sexual victimization indicates the first one was maintained in administrative segregation for two days and provided out of cell time and group programming. The second inmate indicates he was held in segregated housing for one to two days and was provided out of cell time on a rotating schedule and shared a recreation yard with a compatible inmate.</p> <p>115.43(c): PREA Policy 14.15 mandates that if an involuntary segregated housing assignment is made, Classification shall conduct a file review every 30 days to determine whether there is a continuing need for separation from the general population. Agency indicates that over the past 12 months, no inmates were found to be or report to be 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 and staff who supervises inmates in segregated housing indicates inmates at high risk for sexual victimization or who have alleged sexual abuse may be placed in involuntary segregation only until an alternative means of separation from likely abusers can be arranged. Inmates are ordinarily maintained in</p>

involuntary segregation for one or two days until appropriate housing can be arranged. Interview with inmate in segregated housing for risk of sexual victimization indicates he was held in segregated housing no more than two days then was moved to protective custody housing. Interview two inmate placed in segregated housing for risk of sexual victimization indicates the first one was maintained in administrative segregation for two days and provided out of cell time and group programming pending alternative placement. The second inmate indicates he was held in segregated housing for one to two days and was provided out of cell time on a rotating schedule and shared a recreation yard with a compatible inmate pending alternative placement.

115.43(d): Agency indicates that over the past 12 months, no inmates were found to be or report to be at risk of sexual victimization who were assigned to involuntary segregated housing. During the onsite audit, agency identified two inmates who were previously held in involuntary segregated housing over the past 12 months. Review of classification notes for both indicate inmates were placed in involuntary segregation pending alternative housing. Interview of both inmates indicated they spent from one to two days in segregated housing , programmed and alternative housing was located in either housing unit 4C General Population or the protective custody housing unit.

115.43(e): PREA Policy 14.15 mandates that if an involuntary segregated housing assignment is made, Classification shall conduct a file review every 30 days to determine whether there is a continuing need for separation from the general population. California Code of Regulations Title 15 mandates that inmates placed in involuntary segregated housing shall be reviewed every 30 days to determine if there is a continuing need for the segregated housing assignment. Agency indicates that over the past 12 months, no inmates were found to be or report to be at risk of sexual victimization who were assigned to involuntary segregated housing. Interview with staff who supervises inmates in segregated housing indicates they have not heard of any inmate housed in administrative segregation for 30 days. If so, California Code of Regulations dictates inmate must be reviewed and documented every 30 days to determine if continued segregation is required. No records to indicate any inmate was held in involuntary segregation for risk of sexual victimization over 30 days.

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.43.

115.51	<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 verbal notification to Deputy/Officer or any department staff member or volunteer, submitting an Inmate Request form, submitting a Grievance form, writing a confidential letter to the Sheriff, Undersheriff, Facility Captain or Internal Affairs Unit to submit a complaint. Contact information is provided to inmates through the Inmate Handbook and the Sexual Assault Awareness Pamphlet. Interview with random sample of 12 staff selected by auditor from a list of staff from all four shifts working during the onsite audit indicates agency provides reporting methods through grievance forms, writing notes to the staff, verbally informing staff, medical and mental health practitioners, chaplains, family and PREA hotline. All this information is provided in the inmate handbook and in the Sexual Awareness Pamphlet provided at intake. Most housing units also possess additional Sexual Awareness Pamphlets. Interviews with a random sample of 17 inmates selected by auditor from a list of all inmates assigned to Main Jail indicates they are comfortable in reporting allegations of sexual abuse, harassment or retaliation through the grievance system. The mentioned that they can contact custody staff or report through the medical staff. Majority of the inmates indicated they have seen the PREA posters in the housing units and Sexual Awareness Pamphlets but did not read them.</p> <p>115.51(b): Policy 14.15 provides several methods for inmates to report abuse or harassment to a public or private entity that is not part of the Agency. Agency provided Auditor with copy of Inmate Rule Book, Sexual Awareness Pamphlet and PREA posters are all provided to inmates in English, Spanish and Vietnamese. The Inmate Rulebook outlines the inmate's right to be free from sexual abuse and sexual harassment, provided at intake. The Sexual Awareness Pamphlet outlines contact information to report sexual abuse and obtain advocacy for emotional support, provided at intake. The PREA posters outline the limits of confidentiality, monitoring and contact information for outside services for reporting allegations of sexual abuse, placed throughout the facility accessible to both inmates and staff. Policy, Inmate Rulebook and Pamphlet provides contact information with YWCA confidential non-monitored phone contact, Santa Clara County Human Relations Office, Department of Homeland Security. Santa Clara County is a Safe Haven County &amp; prohibited from housing inmates detained solely for civil immigration purposes, however, Policy mandates agency provide access for immigrants held on local or federal charges to contact the Relevant Consulate. Interview with the PREA Compliance Manager indicates inmates have the YWCA hotline available to them. Information is provided via the PREA posters available in each housing unit and throughout the facility. During the onsite physical plant review, auditor observed grievance boxes available in each housing unit with grievance forms accessible to inmates without the need to obtain from staff. Auditor also observed that there were no PREA posters on the 8th floor housing units in the Main Jail South and the YWCA and Human Resources hotline was available but inmates are forced to provide their PIN number to access the hotline. Interview with random sample of 17 inmates indicate 50% are not aware of the PREA hotline as they have not read the PREA posters in the housing units despite their knowledge of the existence. These inmates also have not read the inmate handbook or the Sexual Awareness Pamphlets provided at intake. The other half of the inmates interviewed indicate they know about the</p>



hotline but do not know where it goes. Inmates indicate they believe the hotline is monitored as they must provide their PIN number before accessing the hotline number.

115.51(c): PREA Policy 14.15 mandates staff to accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Prior to the onsite audit, auditor received a 3rd Party letter from an inmate who reported the sexual abuse of two inmates which allegedly occurred at Santa Clara Main Jail. The date of the incidents was not provided in the letter. The PREA Coordinator was immediately informed and Jail Crimes Unit was notified. Both cases were under investigation prior to the letter being received by the auditor. Interview with random sample of 12 staff indicate staff are mandated to accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties and report allegations of sexual abuse immediately to their supervisor. Interview with random sample of 24 inmates indicate staff receive reports through grievances, verbally and through third party.

115.51(d): Policy 14.15 provides staff method of externally reporting incidents of sexual abuse, sexual harassment including 3rd party & anonymous reports through the Dept. of Fair Employment and Housing (DFEH) and Federal Equal Employment Opportunity Commission (EEOC). Policy indicates methods of informing staff regarding private reporting is that staff shall receive PREA training within 90 days of hire and take refresher training every two years. Review of Sheriff's Academy PREA power-point training, Academy PREA training lesson plan, refresher PREA I and PREA II power-point trainings do not contain information to staff regarding methods for staff to privately report sexual abuse and sexual harassment of inmates. Interview with random sample of 12 staff indicate they know the method for staff to privately report sexual abuse and sexual harassment outside of the agency through Internal Affairs, EEOC, Employee Assistance Program and Human Resources. Source of this information is gleaned through the Academy training and refresher training.

#### CONCLUSION:

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.51(b) and corrective action is required.

#### Corrective Action Recommended:

1. Agency to place PREA posters in the Main Jail South 8th floor housing units to provide effective communication for inmates housed in 8A, 8B and 8C.
2. Agency to address the requirement for inmates to use their PIN numbers in order to access the YWCA hotline. The current requirement of using the PIN number prior to contacting YWCA, defeats the purpose of identifying the number as a "Hotline" and indicates to inmates that the phone is monitored by the agency.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

#### Corrective Action Completion:

During the 9/19/18 90-day onsite status review of the facility, auditor observed PREA posters on the 6th and 8th floor housing PODs, in three areas inside the housing units and \*99 posting

for access to the YWCA hotline next to the phones in each housing unit, both floors. Auditor checked the YWCA Rape Crisis hotline from phones on the 8th floor, 6th floor, Booking holding tanks, and South Tower housing units. Auditor found the phones to be working and YWCA advocate was available and answered each call without auditor having to use a PIN number.

Auditor has determined that agency meets all provisions of standard 115.51.

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 &amp; Policy 14.05 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 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.</p> <p>115.52(c): Policy 14.15 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. Revised inmate handbook which 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 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 physical plant review, auditor observed locked grievance boxes in each housing unit accessible only to the shift commander, opened and collected each shift.</p> <p>115.52(d): Policy 14.15 mandates Classification shall verbally advise the inmate within 48 hours and provide, within 5 days, the written response to the inmate that will advise the inmate of the departments determination of risk and any action taken in response to the report or grievance. In the past 12 months, two grievances were filed that alleged sexual abuse/harassment. During the pre-audit phase, the agency provided auditor with both grievances for document review. Auditor determined the written responses were provided within 90 days. Review of each of the two grievances indicate the verbal responses were provided within one day of receipt and written response provided within two days of receipt, informing the inmate that the case was referred to the Special Investigations Unit for review and follow-up. Auditor reviewed the Investigations that were to follow and each one was conducted appropriately. One grievance was a report of sexual abuse. Case was immediately assigned to a Special Investigator date of allegation and was investigated promptly. Inmate has been notified as to the outcome of the investigation and case is currently pending incident review. No 3rd party reports or declination of 3rd party assistance information. Interview with the only inmate who reported a sexual abuse still housed in Main Jail indicates he was</p>

informed in writing of decisions made on his grievance regarding sexual abuse allegation. Review of the grievance in question indicated an immediate response and the case was referred to Jail Crimes Unit for investigation. Inmate was rehoused immediately for his safety.

115.52(e): Policy 14.15 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. Over the past 12 months no inmate declined third-party assistance. Prior to the onsite audit, auditor received a 3rd Party letter from an inmate who reported the sexual abuse of two inmates which allegedly occurred at Santa Clara Main Jail. The date of the incidents was not provided in the letter. The PREA Coordinator was immediately informed and Jail Crimes Unit was notified. One case was in regards to an out of custody sexual assault which was reported to the agency which maintains jurisdiction in the area where the assault occurred. The second case has been under investigation since the original allegation of sexual abuse on 8/17/16, prior to the 3rd Party letter being received by the auditor. Case continues to be investigated and is still an open case.

115.52(f): Policy 14.15 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. Agency reports that in the past 12 months, there have been no imminent sexual abuse grievances filed. Review of two grievances alleging sexual abuse submitted to agency over the past 12 months indicates neither was an emergency grievance. Both grievances were provided to Jail Crimes Unit who opened an immediate investigation.

115.52(g): PREA Policy 14.15 mandates that an inmate may be disciplined for filing a grievance related to alleged sexual abuse only if there is evidence that the inmate filed the grievance in bad faith. Agency indicates that over the past 12 months, there were no inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed the grievance in bad faith.

**CONCLUSION:**

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

115.53	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.53(a): Policy 14.15 mandates inmate access to outside victim advocates for emotional support services via I/M Sex Assault Pamphlet in 3 languages &amp; PREA posters throughout the facility, in every housing unit and next to inmate phones. Phone access is accomplished by the inmate dialing #99 for the hotline. Calls are not monitored or recorded by agency. Inmates are not held solely for civil immigration per County Policy. Interviews with a random sample of 24 inmates selected by auditor from a list of all inmates assigned to Main Jail indicates they received the inmate handbook and Sexual Awareness Pamphlet. A few of them read both documents and are aware of the reporting hotline but majority does not know where it goes. All inmates believe the call through the hotline is toll-free. The Sexual Awareness Pamphlet provides mailing addresses and phone numbers to the YWCA but inmates are not aware of this. Inmates believe any communication with the Rape Crisis Center is confidential with the contact person at YWCA but none of them believe that the agency does not monitor the call since they are required to provide their PIN number before they can access the hotline number despite narrative to the contrary on the PREA posters located throughout the facility and the Sexual Awareness Pamphlets. Interview with two inmates still assigned to Main Jail who reported sexual abuse indicates both did not contact the hotline to report allegation of sexual abuse, they both submitted grievances instead.</p> <p>115.53(b): Sexual Assault Awareness Pamphlet and Inmate Handbook are provided to all inmates at intake. They provide reporting rules governing confidentiality, disclosures and monitoring. PREA Posters available in every housing unit and general areas throughout the facility provide same information. Agency reports that the #99 speed dial in inmate phones used to connect to outside agencies is not monitored or recorded. Interviews with a random sample of 24 inmates indicates none of the inmates interviewed believe that the agency does not monitor the call since they are required to provide their PIN number before they can access the hotline number despite narrative to the contrary on the PREA posters located throughout the facility and the Sexual Awareness Pamphlets. Interview with two inmates still assigned to Main Jail who reported sexual abuse indicates both did not contact the hotline to report allegation of sexual abuse, they both submitted grievances instead.</p> <p>115.53(c): Agency has secured and maintained a Santa Clara County Service agreement with the Young Women’s Christian Association of Silicon Valley (YWCA Rape Crisis Center). Copy of the contract was provided to the auditor. Term of the agreement is from 7/1/15 to 6/30/18. Agency is currently negotiating either an extension to the contract or a new three year contract. Scope of service provides for YWCA to provide crisis-line services, victim advocacy services and support services to detained adults (inmates), residing in the Santa Clara County Sheriff’s Office Detention facilities in compliance with Adult/Jail Prison Standards outlined under PREA. Auditor interview with two YWCA staff members indicate the current MOU is in effect until 6/30/18. Santa Clara County Jail and YWCA is reviewing the MOU and working towards an extension. The review process is currently at it’s last stages, currently being reviewed by County Counsel. The MOU requires posters inside the facilities to be available 24/7 and inmates to have the opportunity to ask questions regarding emotional support, reporting and advocacy. YWCA sometimes find it difficult to access the jail when attempting to</p>

provide follow-up emotional support. Auditor interviewed PREA Coordinator regarding YWCA access and it is regarding obtaining the gate clearance in a short timespan as there are a number of advocates working for YWCA and they have a turnover rate that agency finds difficult to manage. PREA Coordinator is looking into shorten the gate clearance process through the Backgrounds Unit. Advocates has a minimum of 30 minute response time when responding to the hospital for forensic examination support. YWCA provides follow-up care with additional visits and emotional support through the investigation, court and after the case has been adjudicated until it is determined the support is no longer needed

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.53.

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.54(a): Agency has established multiple methods to receive 3rd party reports of sexual abuse and sexual harassment by writing a confidential letter to the Facility Captain, write confidential letter to Chief of Corrections or contacting the Internal Affairs Unit and submitting a complaint per Policy 14.15. Methods are provided publicly on Agency website and on 3rd party posters in public lobbies and visiting areas. 3rd party posters are in English, Spanish and Vietnamese, (La Ley de Eliminacion de Violacion en la prision 2003 PREA Spanish, Vietnamese translation PREA, 3rd Party Reporting information for poster). Prior to the onsite audit, auditor received a 3rd Party letter from an inmate who reported the sexual abuse of two inmates which allegedly occurred at Santa Clara Main Jail. The date of the incidents was not provided in the letter. The PREA Coordinator was immediately informed and Jail Crimes Unit was notified. One case was in regards to an out of custody sexual assault which was reported to the agency which maintains jurisdiction in the area where the assault occurred. The second case has been under investigation prior to the 3rd Party letter being received by the auditor. Case continues to be investigated and is still an open case.</p> <p><b>CONCLUSION:</b> 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> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.61(a): Policy 14.15 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. This includes any retaliation against inmates or staff who report such an incident. Interview with random sample of 12 staff selected by auditor from a list of staff from all four shifts working during the onsite audit indicates all staff are required by policy and training to report all allegations of sexual abuse, sexual harassment or retaliation, to include suspicion of sexual misconduct related to those areas. They also informed auditor they are required to report any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>115.61(b): Policy 14.15 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 sample of 12 staff indicates the only individuals provided sexual abuse information are those who have a need to know such as supervisors, managers, investigators and treatment providers.</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. Agency provided the Santa Clara Valley Health &amp; Hospital System adult custody health services correction plan for the PREA deficiencies. Interview with medical and mental health staff indicates they are require to inform inmates of the practitioners duty to report and the limitations of confidentiality at the initiation of services. They used to have a paper document for that purpose but now the provision is documented by the practitioner in the new Healthlink database. Agency has not provided auditor with verification documentation of its use.</p> <p>115.61(d): Policy 14.15 indicates that if the victim is under age 18 or vulnerable adult, Agency shall report the allegation to the designated state or local services agency under applicable mandatory laws. An investigation is immediately conducted via Internal Affairs and Criminal division investigative units &amp; treated the same as any other sex abuse investigation using Agency protocols. To date there have been no allegations of sexual abuse by victims under age of 18 years or vulnerable adults. Interview with Facility Commander and PREA Coordinator indicates all cases are referred to JCU for investigation. Under 18 years of age, Child Protective Services is alerted and for vulnerable adults Elder Abuse and ADA agencies are alerted.</p> <p>115.61(e): PREA Policy 14.15 mandates that all incidents of sexual abuse, sexual harassment and/or retaliation will be reported to the Facility Captain or Division Captain via the chain of command. The Facility Captain or Division Captain shall report all incidents and reports alleging sexual abuse, sexual assault, sexual misconduct and sexual harassment, including</p>



third-party and anonymous reports to the PREA Coordinator, the Internal Affairs Unit and the Jail Crimes Investigations unit. Interview with Facility Commander indicates all allegations of sexual abuse and sexual harassment no matter where the source, are referred to Jail Crimes Unit for investigation.

**CONCLUSION:**

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.61(c) and corrective action is required.

**Corrective Action Recommended:**

1. Agency to provide auditor with Healthlink documentation which verifies medical and mental health practitioners inform inmates of their duty to report and limitations of confidentiality at the initiation of services. Auditor will request these records from a random selection of inmates who made allegations of sexual abuse or alleged history of sexual abuse during intake screening. The identified inmates will be provided to agency during the 90-day status review.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

**Corrective Action Completion:**

During a 9/19/18 review of supporting documents indicated agency provided auditor with 19 Santa Clara Valley Hospital System Notice of Privacy Practices signed consent acknowledgement forms. Out of the 21 randomly selected inmates, two records were not obtained. One inmate was booked in 2016 and not in custody. One other was not in custody and the booking nurse failed to obtain the Notice of Privacy Practices.

Auditor has determined that agency is in compliance with all provisions of standard 115.61.

<b>115.62</b>	<b>Agency protection duties</b>
	<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. All supervisors who receive a report from staff that an inmate is at substantial risk of imminent sexual abuse will immediately respond, assess and take appropriate action necessary to protect the inmate. Agency reports no inmate was subject to substantial risk of imminent sexual abuse over the past 12 months. Interview with Agency Head designee and Facility Commander indicates when agency learns that an inmate is subject to substantial risk of imminent sexual abuse, the inmate is removed from the threat, Jail Crimes Unit conducts an investigation and either the inmate or perpetrator is rehoused based upon what is needed for the safety of the inmate victim. Interview with random sample of 12 staff indicates the inmate is separated from the perpetrator and kept in a safe place, supervisor is alerted, Jail Crimes Unit is notified and either the perpetrator or victim is rehoused.</p> <p><b>CONCLUSION:</b> 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>
	<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 1485 663">115.63(a): Policy 14.15 mandates that Sergeants are responsible, upon receiving an allegation that an inmate was sexually abused 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, no allegations of sexual abuse while confined at another facility have been received.</p> <p data-bbox="252 707 1477 954">115.63(b): PREA Policy 14.15 mandates 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 policy requires the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p data-bbox="252 999 1453 1133">115.63(c): PREA Policy 14.15 mandates the Facility Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator. The facility will document notification in the JMS system.</p> <p data-bbox="252 1178 1430 1379">115.63(d): Agency reports that in the past 12 months, no allegations of sexual abuse while confined at another facility have been received. Interview with Agency Head designee and Facility Commander indicates the point of contact would be the shift sergeant or shift lieutenant. Jail Crimes Unit is immediately notified and they conduct the investigation when allegations of sexual abuse is received from other facilities.</p> <p data-bbox="252 1435 453 1469"><b>CONCLUSION:</b></p> <p data-bbox="252 1480 1441 1559">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>
	<p data-bbox="252 170 927 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1485 875">115.64(a): Policy 14.15 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. In the past 12 months eight allegations received by agency that an inmate was sexually abused. None of the allegations resulted in the first security staff member to respond to the report separated the alleged victim and abuser. Nor were there any allegations where staff were notified within a time period that still allowed for the collection of physical evidence. Interview with security and non-security staff indicates they follow the 1st Responder Protocol that is identified in the policy:</p> <ul data-bbox="252 927 1441 1216" style="list-style-type: none"> <li>• Immediately separate the victim and perpetrator</li> <li>• Place them both in separate areas with no access to water, under supervision to preserve usable physical evidence</li> <li>• Secure the crime scene</li> <li>• Contact the Supervisor</li> <li>• Contact Jail Crimes Unit</li> <li>• Contact Medical and Mental Health</li> </ul> <p data-bbox="252 1267 1458 1473">Random requests for 1st Responder Protocol reminder cards were provided by each staff upon request from the auditor. This exceeds the Standard. Interview with the one inmate currently housed in Main Jail who reported a sexual abuse indicates his allegation was made via a grievance. Inmate was moved to mental health medical clinic. Classification notes indicate inmate was having mental issues and investigation was unfounded.</p> <p data-bbox="252 1525 1453 1731">115.64(b): Of the eight allegations that an inmate was sexually abused made in the past 12 months, no non-security staff member was the first responder. Interview with security and non-security staff indicates the victim is separated from the perpetrator, placed in an area under supervision with no access to water and the supervisor or custody staff is immediately alerted. They ask inmate not to destroy any physical evidence on their person.</p> <p data-bbox="252 1783 453 1816"><b>CONCLUSION:</b></p> <p data-bbox="252 1827 1441 1901">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): PREA Policy 14.15 provides the Coordinated Response specifically for Santa Clara County Main Jail. The response to the receipt of an allegation of sexual abuse begins with the security or non-custody staff 1st Responder responsibilities. The Coordinated Response includes actions of the facility leadership, investigators, medical and mental health practitioners, medical treatment provisions and Rape Crisis Center advocates (YWCA).</p> <p><b>CONCLUSION:</b> 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 has not provided auditor with collective bargaining agreements for custody staff to verify compliance with this standard. Interview with Agency Head designee indicates there are bargaining unit agreements for California Correctional Peace Officers Association (CCPOA) and Santa Clara County Peace Officer’s Association.</p> <p>115.66(b): Auditor is not required to audit standard provision 115.66(b).</p> <p><b>CONCLUSION:</b> Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 15.66(a) and corrective action is required.</p> <p><b>Corrective Action Recommended:</b> 1. Agency to provide auditor with copies of the collective bargaining agreements for custody staff and to verify compliance.</p> <p>Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.</p> <p><b>Corrective Action Completion:</b> On 6/29/18, agency provided auditor with the computer link to four MOU’s for contracts utilized in all three facilities: CPOA – Correctional Peace Officers Association DSA – Deputy Sheriff’s Association CEMA – County Employees’ Management Association SEIU Local 521 – Service Employees International Union</p> <p>Review of each of the MOU’s verifies that 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 is not limited in any way.</p> <p>Auditor has determined that agency is in compliance with all provisions of 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): PREA Policy 14.15 states that It is the policy of the Office of the Sheriff Custody Bureau/Department of Correction (DOC) to establish a "zero-tolerance" policy related to the sexual assault, sexual harassment and or sexual abuse of inmates, or sexual misconduct toward any inmate by any person and to recognize these inmates as crime victims. It is also the policy of the DOC to comply with PREA regulations through policy, training, supervision and diligent law enforcement activities to 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. All inmates and staff who report sexual abuse, sexual assault, sexual misconduct or sexual harassment or cooperate with resulting investigations have the right to be free from retaliation by other inmates and/or staff. Agency has designated a PREA Manager at the Deputy level and the PREA Coordinator at the Captains level as retaliation monitors.</p> <p>115.67(b): PREA Policy 14.15 mandates 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 investigations. Interview with Agency Head designee indicates inmates are protected from retaliation for sexual abuse or sexual harassment allegations through investigations, monitoring and rehousal. Staff are protected through monitoring, shift change, duty changes, bargaining unit monitoring and Employee Assistance Program for support.</p> <p>115.67(c): PREA Policy 14.15 mandates that following a report of sexual abuse, sexual assault, sexual misconduct or sexual harassment, the classification unit and Mental Health will monitor the conduct of inmates of sexual abuse for at least 90 days following the report to monitor the conduct and treatment of inmates both who have reported sexual abuse and inmates who have reported to have suffered sexual abuse to determine if there are changes in the inmate's behavior that may suggest the inmate has also been the victim of retaliation by other inmates or staff. Immediate action will be taken to prevent any retaliatory action. classification and Mental Health shall continue to monitor beyond 90 days if the initial monitoring indicates the continuing need. Monitoring shall also include periodic status checks. Interview with Facility Commander indicates written notifications are sent out to all staff regarding the anti-retaliation environment within the Department of Corrections. Interview with PREA Coordinator and PREA Manager indicates victims of retaliation are interviewed and evaluated based upon their feelings and beliefs. They are informed that the retaliation monitors can be contacted at any time. Additional monitoring includes review of sick time logs, duty change assignment requests. For inmates we review housing changes, acting out, disciplinaries and housing staff notes.</p> <p>115.67(d): PREA Policy 14.15 mandates that monitoring shall also include periodic status checks. Interview with PREA Coordinator and PREA Manager indicates face to face periodic checks are included in the monitoring actions. Body language provides additional information</p>

sometimes to assess the status of the victim.

115.67(e): PREA Policy 14.15 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 investigations. Interview with Agency Head designee and Facility Commander indicates any individual who cooperates with an investigation expresses fear of retaliation, the same retaliation monitoring provided to staff and inmates are provided here.

115.67(f): Auditor is not required to audit standard provision 115.67(f).

**CONCLUSION:**

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



<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68(a): PREA Policy 14.15 prohibits agency from the placement of inmates who allege to have suffered sexual abuse 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. Agency reports over the past 12 months, no inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing for one to 24 hours awaiting completion of assessment or for longer than 30 days while awaiting alternative placement. Interview with Facility Commander and staff who supervise inmates in Segregated Housing indicates inmates placed in Segregated Housing at risk of victimization have access to programming and are only housed in that unit until alternate available housing is found which takes no longer that two days. Interview with the two inmates placed in Segregated Housing for risk of victimization indicate they both had access to programming and alternative housing was found within two days of their initial placement in Segregated Housing.</p> <p><b>CONCLUSION:</b> 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>
	<p data-bbox="252 170 928 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1481 618">115.71(a): PREA Policy 14.15 mandates that all investigations shall be done promptly, thoroughly, and objectively for all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. This policy was echoed through the interviews of two criminal, two investigative and one major crimes supervising investigative staff members. Auditor’s review of eight sexual abuse and sexual harassment investigations verify all allegations of sexual abuse over the past 12 months were investigated promptly, thoroughly and objectively, to include one which was alleged through 3rd party reporting.</p> <p data-bbox="252 667 1481 1216">115.71(b): PREA Policy 14.15 mandates that Where sexual abuse is alleged, the investigation shall be conducted by Jail Crimes Investigations Unit. (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, which exceeds standard provision 115.71(b). Only criminal investigators who have received special training in investigating sexual abuse will conduct investigations for both allegations of sexual abuse and sexual harassment. Auditor’s review of 2 sexual abuse investigations conducted over the past 12 months determined that both investigation were conducted by JCI officers who possessed the required training under agency PREA policy and PREA mandate. Interviews of two criminal, two investigative and one major crimes supervising investigative staff members indicates only Jail Crimes Investigations Unit investigators conduct investigations of sexual abuse and sexual harassment in a confinement setting and are certified to do so per agency policy.</p> <p data-bbox="252 1265 1481 1556">115.71(c): PREA Policy 14.15 mandates 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. Auditor interviews of two criminal, two investigative and one major crimes supervising investigative staff members indicate special investigator gather and preserve direct and circumstantial evidence to include DNA evidence, forensic evidence, interviews with witnesses, victim, perpetrator, electronic monitoring and written communications and data.</p> <p data-bbox="252 1606 1481 2076">115.71(d): PREA Policy 14.15 mandates that the Sheriff’s Office shall conduct compelled interviews, only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Neither of the two criminal investigative reports reviewed by auditor contained the need for compelled interviews, nor was compelled interviews requested from the District Attorney’s Office. Interviews of two criminal, two investigative and one major crimes supervising investigative staff members indicates that investigators conduct compelled interviews of staff only after consulting with prosecutors. This action maintains in the realm of Internal Affairs who do not conduct investigations in a confinement setting. An Internal Affairs investigation is tolled until the criminal investigation is completed by JCI unit investigators and the criminal case is adjudicated by the District Attorney’s Office. Internal Affairs only investigate agency policy violations.</p> <p data-bbox="252 2125 1437 2159">115.71(e): PREA Policy 14.15 mandates that the credibility of an alleged victim, suspect, or</p>

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. Interviews of two criminal, two investigative and one major crimes supervising investigative staff members indicate the investigation bears credibility of victim, suspect or witnesses. The investigators cannot exhibit or hold bias on anyone. Investigations must be objective, clear, concise, to the point and factual based upon the evidence.

115.71(f): PREA Policy 14.15 mandates that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. Interviews of two criminal, two investigative and one major crimes supervising investigative staff members indicate investigators look for staff actions or failures to act which may contribute to sexual abuse. This is the main focus of Internal Affairs following JCI unit case investigation closure. All reports are documented and contain description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

115.71(g): PREA Policy 14.15 mandates that all criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Pre-audit phase review of the two criminal investigative report determined the documented investigations contained each of the criteria outlined in standard provision 115.71(g). Review of all eight sexual abuse and sexual harassment investigations verify written documentation of the reports.

115.71(h): Eight cases which were investigated over the past 12 months. Three were sexual abuse allegations and five were sexual harassment allegations. Only one case was referred to the DA office for prosecution. The DA declined to prosecute. The second case was not referred to the DA office as there were no witnesses to the alleged sexual abuse and was determined to be unfounded by the JCI investigator. Interview with investigative staff indicate that substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. In fact, all allegations of sexual abuse are referred to the District Attorney's Office no matter what the findings from Jail Crimes Investigations Unit.

115.71(i): PREA Policy 14.15 mandates that If the alleged sexual abuse, sexual assault, sexual misconduct or sexual harassment is inmate-on-inmate, the Department shall retain all written investigative reports for as long as the victim and the alleged abuser are incarcerated, plus 5 years. If the alleged sexual abuse, sexual assault, sexual misconduct or sexual harassment is staff-on-inmate, all administrative and criminal reports shall be retained as long as the alleged abuser is incarcerated or employed by the agency, plus 5 years.

115.71(j): PREA Policy 14.15 mandates that the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation. Interview with investigative staff indicates that departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for

terminating an investigation.

115.71(k): Auditor is not required to audit standard provision 115.71(k).

115.71(l): N/A - Santa Clara County Sheriff's Department conducts their own administrative and criminal investigations.

**CONCLUSION:**

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): PREA Policy 14.15 mandates that the Sheriff's Office imposes a standard of a preponderance of evidence or a lower standard of proof when determining whether allegations of sexual abuse, sexual assault, sexual misconduct or sexual harassment are substantiated. Interview with investigative staff indicates they impose no standard higher than preponderance of the evidence in their determinations of substantiated findings in sexual abuse or sexual harassment cases.</p> <p><b>CONCLUSION:</b> 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>
	<p data-bbox="252 170 898 203"><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 1485 1346">115.73(a): PREA Policy 14.15 mandates that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. In the past 12 months, there have been eight criminal and administrative investigations completed by the agency, two sexual abuse and six sexual harassment cases. Out of the eight investigations, all of which were reviewed by auditor, only one case failed to provide the inmate notification as to the outcome of the investigation (Case #72). Interview with Facility Commander indicates notifications are provided to inmate victims verbally and in writing, documented in a form letter. Auditor review of all eight sexual abuse and sexual harassment investigation had written notification via form letter to each inmate except for Case #72 as mentioned above. Interview with two criminal investigators indicate they are not aware of any requirement to notify the victim as to the outcome of the investigation. In 2017, agency issued a directive to mandate the Jail Crimes Unit to inform the PREA Coordinator's office when the investigation is completed and the outcome. The PREA Coordinator's office then provides notification as to the outcome of the investigation. This explains why over the past 12 months only one case was not provided notification to the inmate victim. Interview with two Internal Affairs investigators indicated that in accordance with California Penal Code section 832.5, if a complaint is filed by a citizen (which includes inmates), Internal Affairs is mandated to provide said citizen notification as to the outcome of the investigation. Interview with the Major Crimes investigator indicates his unit is mandated to provide notification to inmate victims upon completion of the investigation. Interview of the one inmate, currently housed at the Main Jail who reported a sexual abuse indicated he was unaware if the agency is required to notify a victim of an allegation of sexual abuse upon the completion of the investigation.</p> <p data-bbox="252 1397 1469 1514">115.73(b): N/A – Santa Clara County Sheriff's Department is responsible for conducting both administrative and criminal investigations. Over the past 12 months none of the eight criminal and administrative investigations have been investigated by an outside entity.</p> <p data-bbox="252 1570 1469 1731">115.73(c): PREA Policy 14.15 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 data-bbox="252 1783 1273 2029" 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 data-bbox="252 2085 1422 2157">Agency reports 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</p>

facility in the past 12 months.

115.73(d): PREA Policy 14.15 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:

1. The alleged abuser has been indicted on a charge related to sexual abuse or sexual assault within the facility;
2. The agency learns that the alleged abuser has been convicted of a charge related to sexual abuse or sexual assault.

There have been two inmate on inmate sexual abuse investigations in the past 12 months. Both cases were determined to be unfounded.

115.73(e): PREA Policy 14.15 mandates that all such notifications or attempted notifications to the inmate victims as to the outcome of any investigations that has been substantiated, unsubstantiated or unfounded shall be documented. Any obligation to report under PREA standards shall terminate if the inmate is released from custody. Review of the 8 administrative and criminal investigations conducted over the past 12 months concluded that six cases documented notification to the victims. One inmate victim was released prior to the completion of the investigation. One other was not provided notification even though the investigation was completed two months prior to the inmate's release from custody.

115.73(f): Auditor is not required to audit standard provision 115.73(f).

**CONCLUSION:**

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

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.76(a): PREA Policy 14.15 mandates that 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. All staff terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of being terminated, shall be reported to the law enforcement agencies of jurisdiction, unless the activity was clearly not criminal.</p> <p>115.76(b): Agency reports that over the past 12 months no staff from the facility violated agency sexual abuse or sexual harassment policies. None have been terminated or resigned prior to termination for violating agency sexual abuse or sexual harassment policies.</p> <p>115.76(c): PREA Policy 14.15 mandates that 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 member from the facility have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies.</p> <p>115.76(d): PREA Policy 14.15 mandates that all staff terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of being terminated, shall be reported to the law enforcement agencies of jurisdiction, unless the activity was clearly not criminal. In the past 12 months, no staff from the facility have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p><b>CONCLUSION:</b> 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): PREA Policy 14.15 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 Unit, unless the activity was clearly not criminal, and to relevant licensing bodies. In the past 12 months no contractor or volunteer engaged in sexual abuse of inmates.</p> <p>115.77(b): PREA Policy 14.15 mandates that 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. Interview with the Facility Commander indicates any sexual abuse or sexual harassment by contractor or volunteer results in immediate clearance revocation. No access to the inmate population or the jail property. Case is immediately investigated by Jail Crimes Unit and if unfounded, the contractor or volunteer can re-apply for clearance. If substantiated, the gate clearance is permanently terminated. If unsubstantiated, the decision is made by the Chief of Corrections if a re-application of a gate clearance is granted.</p> <p><b>CONCLUSION:</b> 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): PREA Policy 14.15 mandates 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. Auditor reviewed the eight administrative and criminal investigations conducted over the past 12 months. Two cases involved an inmate on inmate sexual abuse allegation, both of which were deemed unfounded. There were no criminal findings of guilt for inmate on inmate sexual abuse occurring at the facility.</p> <p>115.78(b): PREA Policy 14.15 mandates that Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Review of the eight sexual abuse and sexual harassment investigations that occurred over the past 12 months verify compliance to this standard provision. Interview with Facility Commander indicates criminal sanctions are provided in the California Penal Code as sexual abuse is a crime in California. Disciplinary actions are decided through the outcome of a disciplinary hearing and impositions of sanctions are decided through the Inmate Rules violation and infraction section.</p> <p>115.78(c): PREA Policy 14.15 mandates that The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Interview with Facility Commander indicates mental health and disability considered whether it may have contributed to behavior when determining what type of sanction, if any, should be imposed.</p> <p>115.78(d): PREA Policy 14.15 indicates that 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. Interview with medical and mental health staff indicates mental health offers counseling for offenders with history of predation. They are under no obligation to participate.</p> <p>115.78(e): PREA Policy 14.15 mandates that an inmate may be disciplined if found guilty of sexual victimization of a staff member.</p> <p>115.78(f): PREA Policy 14.15 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> <p>115.78(g): The California Penal Code prohibits consensual sexual activity between inmates incarcerated in California correctional facilities and inmates may be found guilty of a misdemeanor. Non-consensual sexual activity between inmates is considered a criminal action and is investigated and prosecuted. The inmate handbook cites consensual sexual activity</p>

between inmates is a deemed a serious violation of the inmate rules and participant of such actions may be sanctioned if found guilty following a disciplinary hearing.

**CONCLUSION:**

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)/(c): PREA Policy 14.15 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, ACHS Mental Health will conduct, within 14 days, a follow-up meeting with the inmate. Over the past 12 months 100% of inmates who disclosed prior victimization during screening who were offered a follow up meeting with a medical or mental health practitioner. Agency provided auditor with copies of six medical and mental health records of inmates who disclosed any prior sexual victimization during screening. Auditor noted that each of the inmates were seen by a mental health practitioner the same day the disclosure was made. Interviews with inmates who disclosed sexual victimization at risk screening indicates that when they disclosed this information at booking and classification, they were referred to mental health. They met with mental health practitioner same day but declined treatment. Interview with classification staff indicates that when an inmate discloses history of sexual abuse he/she is immediately referred to mental health and seen the same day. This usually occurs during booking/intake with medical nurse upon entry. If disclosure is made during the classification interview, the same process is initiated and documented. Agency provided auditor with copy of six mental health documented referrals from booking/classification that occurred over the past 12 months. All inmates were seen by mental health within 24 hours of intake.</p> <p>115.81(b): N/A – Standard provision 115.81(b) does not apply as agency is a county jail, not a prison.</p> <p>115.81(d): PREA Policy 14.15 mandates 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. Interview with medical and mental health staff indicate that medical and mental health files are secured through the Healthlink system and access is limited to medical and mental health practitioners. The system is not linked in any way with the Jail Management System.</p> <p>115.81(e): PREA Policy 14,15 mandates that Medical and mental health staff shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting. Interview with medical and mental health staff indicates they are require to inform inmates of the practitioners duty to report and the limitations of confidentiality at the initiation of services. They used to have a paper document for that purpose but now the provision is documented by the practitioner in the new Healthlink database. Agency has not provided auditor with verification documentation of its use.</p> <p><b>CONCLUSION:</b> Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.81(e) and corrective action is required.</p>

Corrective Action Recommended:

1. Agency to provide auditor with Healthlink documentation which verifies medical and mental health practitioners inform inmates of their duty to report and limitations of confidentiality at the initiation of services. Auditor will request these records from a random selection of inmates who made allegations of sexual abuse or alleged history of sexual abuse during intake screening. The identified inmates will be provided to agency during the 90-day status review.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

Corrective Action Completion:

Auditor provided agency with a random selection of 21 inmates from inmate listing provided by the agency. On 7/26/18, agency provided the auditor with 19 Santa Clara Valley Hospital System Notice of Privacy Practices signed consent acknowledgement forms. Out of the 21 randomly selected inmates, two records were not obtained. One inmate was booked in 2016 and was released in 2017 custody. One other was not in custody and the booking nurse failed to obtain the Notice of Privacy Practices.

Auditor has determined that agency is in compliance with all provisions of standard 115.81.

Auditor has determined that agency is in compliance with all provisions of 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): PREA Policy 14.15 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 indicates inmates receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of treatment and diagnosis are determined by the medical and mental health PR actioners according to their professional judgement. Interview with the one inmate currently housed at Main Jail who reported sexual abuse indicates that after reporting sexual abuse, he was immediately seen by medical and a checkup was conducted. Immediately following the medical checkup he was seen by mental health.</p> <p>115.82(b): PREA Policy 14.15 mandates that at the initiation of the 1st responder protocol, custody and non-custody staff shall immediately take steps to protect the victim by separating victim and perpetrator and putting the victim in a safe place following an allegation of sexual abuse or imminent sexual abuse. 1st responder notifies his/her supervisor and secures the crime scene. Per the Coordinated Response for each facility, the supervisor contacts medical and mental health.</p> <p>115.82(c): PREA Policy 14.15 mandates that Inmate victims of sexual abuse while incarcerated are 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. Interview with medical and mental health staff indicates inmate victims of sexual abuse while incarcerated are 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 by both SAFE/SANE/SART following forensic examination and also through medical once inmate is returned from the hospital. Interview with inmate who reported sexual abuse indicates there was no forensic examination and medical care was provided on site.</p> <p>115.82(d): Interview with medical and mental health staff indicates treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.82.</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): PREA Policy 14.15 mandates Alameda County Health Services (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 indicate evaluation and treatment of victims of sexual abuse shall include follow-up services, treatment plans and referrals to agencies when released from custody or transfer to another facility for emotional support and continued care.</p> <p>115.83(c): PREA Policy 14.15 mandates Alameda County Health Services (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 indicates inmate victims of sexual abuse is provided with medical and mental health services consistent with the community level or care. Medical staff indicate the care provided to inmates is better than the community level of care because medical and mental health staff is available 24/7 for access to inmates and referral services.</p> <p>115.83(d): PREA Policy 14.15 mandates that Female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. Interview with SAFE/SANE/SART nurse and jail medical staff indicates victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.</p> <p>115.83(e): PREA Policy 14.15 mandates that If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. Interview with SAFE/SANE/SART nurse and jail medical staff indicates female victims of sexual abuse shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p>115.83(f): PREA Policy 14.15 mandates that Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Interview with SAFE/SANE/SART nurse and jail medical staff indicate that inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.</p> <p>115.83(g): PREA Policy 14.15 mandates that treatment services are 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. Interview with inmate who reported sexual abuse indicated he incurred no financial cost as a result of medical and mental health</p>

treatment conducted as a result of the sexual abuse allegation.

115.83(h): N/A – Standard provision 115.83 is not applicable as facility is a jail.

**CONCLUSION:**

Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.83.

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.86(a): PREA Policy 14.15 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. During the past 12 months, three cases were found to be substantiated, Case #35, Case #42. Incident Reviews were conducted on both cases. Incident Review was not conducted on the third investigation Case #72.</p> <p>115.86(b): PREA Policy 14.15 mandates that incient reviews shall be conducted within 30 days of the conclusion of the investigation. During the past 12 months, two sexual abuse cases were found to be substantiated, Case #35, Case #42. Incident Reviews were conducted on both cases.</p> <p>115.86(c): PREA Policy 14.15 mandates the sexual abuse incident review team shall consist of the Assistant Sheriff, PREA Coordinator/Custody Compliance Captain, Internal Affairs Lieutenant, PREA Manager, Medical staff representative (when applicable and appropriate) and Mental Health staff representative (when applicable and appropriate). Interview with the Facility Commander indicates the Incident Review Team members include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>115.86(d): PREA Policy 14.15 mandates that the review team shall consider:</p> <ol style="list-style-type: none"> <li>1. Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse, sexual assault, sexual misconduct or sexual harassment;</li> <li>2. 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 was motivated or otherwise caused by other group dynamics at the facility;</li> <li>3. An assessment of physical plant barriers that may have enabled the alleged sexual abuse, sexual assault, sexual misconduct or sexual harassment to occur;</li> <li>4. An assessment of the adequacy of staffing levels in that area at the time of the incident;</li> <li>5. An assessment of whether monitoring technology should be deployed or augmented to supplement supervision by staff.</li> </ol> <p>Interview with the Facility Commander indicates the team constantly reviews best practices, staffing analyses, blind spots and effective prevention strategies. Interview with the PREA Compliance Manager and member of the Incident Review Team indicates the Incident Review Team documents and prepares report from the review including any determinations and recommendations for improvement. The reports are forwarded to the PREA Compliance Manager and also to the PREA Coordinator. Findings from review of incident reviews conducted over the past 12 months corroborate the interview statements.</p> <p>115.86(e): PREA Policy 14.15 mandates that Upon conclusion of the sexual abuse incident</p>



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 the reasons for not doing so. Following a number of Incident Review Board meetings in 2017, a directive was issued and implemented on findings found as a result of the meetings. The directive was issued to all Main Jail staff:

- Ensure PREA victims are referred to YWCA or are informed that they could dial#99 should the victim, later, desire an advocate regarding the PREA incident.
- Ensure both the Victim and Suspect are to be referred to Mental Health during a PREA incident. This ensures both are given the opportunity to express themselves.
- Mental Health referrals must indicate that the referral is for a PREA event.
- Employee's Reports need to include more details. More details would include but are not limited to, staff on scene, staff notified of the incident, staff that responded to the incident, victim and suspect referred to mental health, victim referred to YWCA, incident location details (cell, dayroom, shower, sundeck, kitchen), housing capacity at the time of the incident, housing population at the time of the incident, and if the incident was captured on video or not.
- Follow-up with Jail Crimes to verify they have received notice.

#### CONCLUSION:

Based upon the analysis of evidence, the auditor finds the facility is not fully compliant with Standard provision(s) 115.86(a) and corrective action is required.

#### Corrective Action Recommended:

1. Agency to conduct a case review on Case #72 and provide auditor with the number of substantiated and unsubstantiated sexual abuse investigations conducted from 6/1/18 to 10/6/18 to verify compliance with this standard provision.

Auditor will conduct a 90-day status review on 10/6/18 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: 1/4/19.

#### Corrective Action Completion:

Further review of Case #72 determined that the case was actually a sexual harassment case, not a sexual abuse investigation. Agency used to conduct Incident Review Boards on substantiated and unsubstantiated sexual abuse and sexual harassment cases. The standard mandates that sexual abuse cases are to come before the Incident Review Board. The agency stopped reviewing the sexual harassment cases in 2017.

Auditor has determined that agency is in compliance with all provisions of standard 115.86.

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.87(a)/(c): PREA Policy 14.15 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. 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>115.87(b): PREA Policy 14.15 mandates that the agency aggregate the incident-based sexual abuse data at least annually. Auditor's review of Annual Reports 2015-2016 and 2016-2017 verifies the use of aggregated incident-based sexual abuse data.</p> <p>115.87(d): PREA Policy 14.15 mandates that the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p>115.87(e): N/A – Standard provision 115.87(e) is not applicable as agency does not contract for the confinement of its inmates.</p> <p>115.87(f): N/A – Standard provision 115.87(f) is not applicable as the DOJ has not requested agency data.</p> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.87.</p>

<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 1481 450">115.88(a): PREA Policy 14.15 mandates the 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="252 499 1481 658" 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="252 712 1481 1171">Auditor pre-audit phase document review of the 2017 Annual Report Chart and the 8/1/16 – 7/31/17 Annual Report verifies agency’s compliance with standard provision 115.88(a). Interview with Agency Head designee indicates incident-based data is utilized to assist with looking for patterns for corrective action ie blind-spots. Whenever data indicates a non-compliance issue, adjustments to the physical plant or internal operations are implemented. Interviews with PREA Coordinator and PREA Compliance Manager indicates the agency reviews data and aggregates in order to assess and improve effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The Office of Compliance securely retains the collected data. Agency has taken corrective action based upon data over the previous years, resulting in an enhanced camera system, additional camera installations and custody staff body cameras in all three facilities.</p> <p data-bbox="252 1225 1481 1514">115.88(b): Policy 14.15 mandates that the 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. Auditor’s pre-audit phase review of 2017 Annual Report Chart and the 8/1/16 – 7/31/17 displayed a comparison reports by facility of the PREA cases for the periods spanning 2014, 2015, 2016 and 2017. Corrective actions and Continuous Prevention Measures from previous years is also indicated.</p> <p data-bbox="252 1568 1481 1812">115.88(c): PREA Policy 14.15 mandates that all sexual victimization data required to be made public shall be collected from all facilities and made available to the public at least annually through the department’s website. Auditor accessed the agency’s website during the pre-audit phase and located the 2016/2017 Annual Report. Interview with the Agency Head designee indicates the agency head reviews and approves annual reports prior to placement on the agency website.</p> <p data-bbox="252 1865 1481 1989">115.88(d): Policy 14.15 mandates that all personal identifiers will be removed from all sexual victimization data made available to the public. Interview with the PREA Coordinator indicates all personal identifying information is redacted from the Annual report.</p> <p data-bbox="252 2042 1481 2166"><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.88.</p>

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.89(a): PREA Policy 14.15 mandates that retention of data and records of any claims associated with any sexual victimization will be securely maintained with the PREA Coordinator per Departmental Policy. Interview with the PREA Coordinator indicates that the Office of Compliance securely retains the collected data.</p> <p>115.89(b): PREA Policy 14.15 mandates that the Department shall collect aggregated sexual abuse data from facilities under its direct control using a standard instrument and set of definitions. Review of 2016/2017 Annual Report on agency website verifies agency’s compliance with standard provision 115.89(b). <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>.&lt;br /&gt;</p> <p>115.89(c): PREA Policy 14.15 mandates that all personal identifiers will be removed from all sexual victimization data made available to the public. Review of 2016-2017 Annual Report verifies compliance with this standard provision.</p> <p>115.89(d): PREA Policy 14.15 mandates that all data 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> <p><b>CONCLUSION:</b> Based upon the final analysis of evidence, the auditor finds the facility is fully compliant with Standard 115.89.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1476 705">Agency has three facilities and has had a PREA audit conducted every year since 2014. Final PREA audit reports for each year is maintained on the agency website for public access. Auditor was provided access to observe all areas within the facility. There are no outbuildings attached to the Main Jail as it is self contained. The auditor was permitted to request and receive copies of any relevant documents, including electronically stored information. Interviews of inmates and staff was conducted in private settings such as administrative conference rooms for staff and private interview rooms with inmates. Inmates were allowed to send confidential correspondence to the auditor as if they were communicating with legal counsel. Auditor received two correspondence letters from inmates prior to the onsite audit.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<p data-bbox="252 904 901 938"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 983 526 1016"><b>Auditor Discussion</b></p> <p data-bbox="252 1061 1444 1308">PREA Audit Final reports are available to the public on the Agency website for the following years: 2014 2015 2016 2017</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

115.12 (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 OR the response to 115.12(a)-1 is "NO".)	na

115.13 (a)	<b>Supervision and monitoring</b>	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

	consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	
	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?	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 in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	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 here for facilities with less than 50 inmates before August 20,2017.)	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?	yes

115.15 (d)	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	<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	yes

	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?	
	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, or to enlist the services of any contractor, who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

<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)	<b>Evidence protocol and forensic medical examinations</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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)	<b>Evidence protocol and forensic medical examinations</b>	
	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?	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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na

115.21 (h)	<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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	na

115.22 (a)	<b>Policies to ensure referrals of allegations for investigations</b>	
	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)	<b>Policies to ensure referrals of allegations for investigations</b>	
	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)	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does such publication 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)	<b>Employee training</b>	
	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 such education?	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

<b>115.33 (d)</b>	<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

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

<b>115.33 (f)</b>	<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

<b>115.34 (a)</b>	<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 have received 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?	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?	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?	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?	yes



<b>115.35 (b)</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.)	na

<b>115.35 (c)</b>	<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?	yes

<b>115.35 (d)</b>	<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?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

<b>115.41 (a)</b>	<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

<b>115.41 (b)</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)	Screening for risk of victimization and abusiveness	
	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?	yes

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, when 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, when 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, when 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 a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: 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?	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?	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?	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 access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	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



<b>115.43 (e)</b>	<b>Protective Custody</b>	
	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

<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	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

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	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?	yes

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

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

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from 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)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	<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?	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).)	na

<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>	
	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.)	na

<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.)	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.)	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)	<b>Sexual abuse incident reviews</b>	
	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)	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	<b>Data collection</b>	
	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)	<b>Data collection</b>	
	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.)	na

<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.)	na

<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.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na

<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 within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY 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