

# PREA Facility Audit Report: Final

**Name of Facility:** Olmsted County Adult Detention Center

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 10/08/2022

**Date Final Report Submitted:** 11/22/2022

## Auditor Certification

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

**Auditor Full Name as Signed:** Walter Krauss

**Date of Signature:** 11/22/2022

## AUDITOR INFORMATION

<b>Auditor name:</b>	Krauss, Walter
<b>Email:</b>	waltjk@aol.com
<b>Start Date of On-Site Audit:</b>	08/22/2022
<b>End Date of On-Site Audit:</b>	08/23/2022

## FACILITY INFORMATION

<b>Facility name:</b>	Olmsted County Adult Detention Center
<b>Facility physical address:</b>	101 4th Street Southeast, Rochester, Minnesota - 55904
<b>Facility mailing address:</b>	

## Primary Contact

<b>Name:</b>	Macey Tesmer
<b>Email Address:</b>	tesmer.macey@co.olmsted.mn.us
<b>Telephone Number:</b>	5073286791

#### Warden/Jail Administrator/Sheriff/Director

<b>Name:</b>	Brian Howard
<b>Email Address:</b>	howard.brian@co.olmsted.mn.us
<b>Telephone Number:</b>	5073286837

#### Facility PREA Compliance Manager

<b>Name:</b>	Macey Tesmer
<b>Email Address:</b>	tesmer.macey@co.olmsted.mn.us
<b>Telephone Number:</b>	O: (507) 328-6835

#### Facility Health Service Administrator On-site

<b>Name:</b>	Ellen Roiger
<b>Email Address:</b>	roiger.ellen@co.olmsted.mn.us
<b>Telephone Number:</b>	507-328-6854

#### Facility Characteristics

<b>Designed facility capacity:</b>	202
<b>Current population of facility:</b>	82
<b>Average daily population for the past 12 months:</b>	79
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males

<b>Age range of population:</b>	18-99
<b>Facility security levels/inmate custody levels:</b>	Max
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	96
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	14
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	72

#### AGENCY INFORMATION

<b>Name of agency:</b>	Olmsted County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	141 4th Street, Rochester, Minnesota - 55904
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

#### Agency Chief Executive Officer Information:

<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

#### Agency-Wide PREA Coordinator Information

<b>Name:</b>	Brian Howard	<b>Email Address:</b>	howard.brian@co.olmsted.mn.us
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## SUMMARY OF AUDIT FINDINGS

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

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

### Number of standards exceeded:

0	
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### Number of standards met:

45	
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### Number of standards not met:

0	
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## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-08-22
2. End date of the onsite portion of the audit:	2022-08-23

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Olmsted County Victim Services / Main Office: 507-328-7270. 24/7 Crisis Line: 507-289-0636

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	202
15. Average daily population for the past 12 months:	79
16. Number of inmate/resident/detainee housing units:	7
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	97
<b>37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0

<b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b>	It shall be noted that the data provided in items # 38-47 are not typically tracked by this facility over time. As a result, the data provided above are estimates according to Administration and responses to # 39, 42, and 46 were said to be "Unknown" by the facility. For those items, there were cases that met the criteria, but Administration was uncertain as to how many so "0" was entered as a result.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b>	100

<b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	35
<b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b>	10
<b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b>	No additional comments are necessary at this time.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	11
<b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None



<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	<p>A complete roster of the detainees on the census at the Adult Detention Center was provided to this auditor upon request and upon arrival. The list was broken down by date of admission and location in the facility. For each housing unit and each level/floor of each housing unit that housed detainees on the date of the on-site audit, a detainee was selected for interview by this auditor. The auditor would count every seventh detainee on the list and whenever a detainee refused to be interviewed, the next one on the list was selected.</p>
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	<p>No additional comments are necessary at this time.</p>
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	<p>2</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<b>59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</b>	<div> <input type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees. </div> <div> <input checked="" type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed. </div>
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees with physical disabilities, can be found at this facility, but not within the census on the date of the on-site audit.
<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who are blind or have low vision, can be found at this facility, but not within the census on the date of the on-site audit.
<b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who are deaf or hard of hearing, can be found at this facility, but not within the census on the date of the on-site audit.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees identified as Limited English Proficient, can be found at this facility, but not within the census on the date of the on-site audit.</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who identified as lesbian, gay, or bisexual, can be found at this facility, but not within the census on the date of the on-site audit.</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who identified as transgender or intersex, have been at this facility, but not on the date of the on-site audit.</p>

<b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div data-bbox="817 374 1469 533"> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div data-bbox="817 580 1469 660"> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who reported sexual abuse at this facility, have not been found or are not present within this facility at the time of the on-site audit or within the past twelve months.
<b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<div data-bbox="817 1597 1469 1756"> <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. </div> <div data-bbox="817 1803 1469 1883"> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

<b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b>	<p>This auditor reviewed prior intake screens, documentation, spoke to staff informally as well as the detainees, and reviewed policy to support the facility's claims that the targeted population, in this case those detainees who disclosed prior sexual victimization, can be found at this facility, but not within the census on the date of the on-site audit.</p>
<b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b>	<p>0</p>
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<p><input type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input checked="" type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	<p>No additional comments are necessary.</p>
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>71. Enter the total number of RANDOM STAFF who were interviewed:</b>	<p>13</p>

<b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
<b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No additional comments are necessary.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
<b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	14
<b>76. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No



<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>79. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input checked="" type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No additional comments are necessary.

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

**84. Did you have access to all areas of the facility?**

☒ Yes

☐ No

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

**85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?**

☒ Yes

☐ No

**86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?**

☒ Yes

☐ No

**87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?**

☒ Yes

☐ No

**88. Informal conversations with staff during the site review (encouraged, not required)?**

☒ Yes

☐ No

<b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	Any and all areas to which this auditor requested access was authorized and met with support and quick response by Administration. Surveillance camera monitoring was reviewed as was the use of the Turnkey kiosks. Informal conversations with staff and detainees occurred throughout the on-site audit.
<b>Documentation Sampling</b>	
Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.	
<b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No additional comments are necessary.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.	

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	2	0	2	0
<b>Staff-on-inmate sexual abuse</b>	1	0	1	0
<b>Total</b>	3	0	3	0

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

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

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	1	0
Staff-on-inmate sexual abuse	0	1	0	0
Total	0	3	1	0

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

1



<b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	1
<b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>a. Explain why you were unable to review any sexual harassment investigation files:</b>	There were no cases of reported or documented sexual harassment claims within the past twelve months. Therefore, there were no case files to be reviewed.
<b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

<b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No additional comments are necessary.

## SUPPORT STAFF INFORMATION

### DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

### Non-certified Support Staff

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

☐ Yes

☒ No

## AUDITING ARRANGEMENTS AND COMPENSATION

**121. Who paid you to conduct this audit?**

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

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Olmsted County Adult Detention Center has an established and well documented zero tolerance policy. This is evidenced by the Olmsted County ADC Policies 606.1 / 11-01 'PREA Definitions', 606.2 / 11-02 'PREA Prevention Planning', Lexipol 606 'PREA Policy' as well as the Administrative and Platoon Rosters. Furthermore, the Sheriff, Chief Deputy/PREA Coordinator, and the Captain/ PREA Compliance Manager were interviewed, and the facility was asked to upload the 'Zero Tolerance for Sexual Abuse and Sexual Harassment' posters in both English and Spanish. The Detainee Handbook and PREA brochure entitled 'End the Silence' were also reviewed. All of these aforementioned factors were used in determining compliance with this standard.</p> <p>Prisons and jails are required to have an agency-wide, upper level PREA Coordinator in addition to a PREA Compliance Manager. This requirement is met by Olmsted County's Chief Deputy, who serves as the PREA Coordinator and a Captain who serves as the PREA Compliance Manager. During interviews with the PREA Coordinator and PREA Compliance Manager, each of these two staff indicated they have sufficient</p>

	<p>time and authority to develop, implement, and oversee agency/facility efforts to comply with the PREA standards.</p> <p>The Adult Detention Center has a policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. The policies outline the prevention, detecting, reporting, and response to sexual abuse and sexual harassment allegations.</p> <p>Definitions that mirror the PREA Standards are included in the Policy 606.1 / 11-01 'PREA Definitions' as well as sanctions for those who violated policy. All interviewed shared their knowledge of the strategies and responses towards PREA allegations.</p> <p>While nearly all staff and residents interviewed were aware of who they would need to report any PREA-related concerns, many did not know which staff are designated as the PREA Coordinator and the PREA Compliance Manager. This was the case for six of eleven staff asked this question. Administration was asked to provide information to both the residents and staff specifying that the Chief Deputy is the PREA Coordinator and the Captain is the PREA Compliance Manager. At the request of this auditor, this information should also be included in the PREA information distributed to new residents admitted to the facility. Corrective action included providing that information on a sheet and have residents and staff sign off that the training has been received and is understood. The training sheets with signatures as verification for each resident and staff member was provided to ensure compliance as was the updated PREA brochures in both English and Spanish.</p> <p>Regarding 115.211 (a), the policy that was uploaded for the Pre-Audit Questionnaire was incomplete as it did not support the zero tolerance approach outlining Olmsted County ADC's approach to preventing, detecting, and responding to sexual abuse and harassment. Furthermore, the Administrative and Platoon Roster identified a second PREA Compliance Manager in the administration, which is reportedly not the case.</p> <p>Corrective action included uploading the Olmsted County ADC's complete PREA policy and a corrected Administrative and Platoon Roster.</p> <p>At the 45-day mark, the updated policy had been provided, but the updated roster had yet to be. As a result, the roster was updated and uploaded during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	All contracts with entities to house Olmsted County detainees will include the requirement that the entity be PREA compliant; however, there are no such contracts currently in effect. This requirement is addressed in Policy 606.2 / 11-02 'PREA Prevention Planning', which was uploaded upon request by this auditor. Contract

	management and compliance would be the responsibility of Olmsted County Purchasing. In addition, the PREA Coordinator would make a site visit annually during the first quarter, of all contracted agencies, interview any/all Olmsted County detainees that would be housed there and would request aggregate data on sexual abuse incidents.
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.2 / 11-2 'PREA Prevention Planning', 201.7 'Staffing Plan', three annual PREA Monitoring Reviews, and multiple examples of unannounced rounds by higher level staff were reviewed. Additionally, interviews were conducted to further determine compliance. Observations of staff to detainee ratios and supervision within the various housing units and program areas, informal discussions with staff during the onsite facility tour, and interviews/discussions with the Chief Deputy/PREA Coordinator and Captain/PREA Compliance Manager were all considered in assuring compliance with this standard.</p> <p>Whenever necessary but no less frequently than once each year in the third quarter, for each facility and in consultation with the PREA Coordinator, the director will assess, determine, and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other technologies, and resources the facility has available to commit to ensure adherence to the staffing plan. Examples of three such annual PREA Monitoring Reviews were uploaded for this purpose. This auditor recommended that each of the specific items on 115.113 (c)-1 are written to ensure the appropriate completion of this requirement moving forward.</p> <p>On August 22, 2019, the facility was placed on lockdown during a staffing shortage, thereby the staffing plan was not adhered to, but it was clearly documented as required.</p> <p>Per policy 'PREA Prevention Planning', Sergeants and higher-level command staff will conduct unannounced rounds to identify and deter staff sexual abuse and harassment. Staff is prohibited from alerting other staff members when any member of the leadership team is conducting rounds.</p> <p>Policy 24.4 'Staffing Analysis' was uploaded at the request of this auditor for corrective action to meet the policy component of this standard. Corrective action also included uploading an updated staffing plan that addresses all elements of 115.13 (c)-1. At the end of the 45-day Interim Phase, this correction had yet to be provided. The documentation was subsequently provided during the 180-day Corrective Action Phase of the process and the facility achieved compliance with this standard.</p>

115.14	Youthful inmates
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1410 454">According to Policy 502.1 / 9-2 'Persons Not Accepted in the Detention Center', juveniles under the age of 18 (eighteen) are not accepted at the facility and, as a result, this standard would typically be not applicable (3-ALDF-4B-04).</p> <p data-bbox="256 499 1410 566">1. Persons under the age of 18 (eighteen) will be allowed only in the booking area when all of the following conditions exist:</p> <ul data-bbox="256 611 1426 891" style="list-style-type: none"> <li>a. They are in custody for a DWI arrest.</li> <li>b. They are escorted at all times by the arresting authority.</li> <li>c. They remain in the booking area no longer than necessary to facilitate the collection of identification data through photographs, fingerprints and DWI testing. (Less than four (4) hours).</li> <li>d. All detainees are secured in cells with cell windows covered to prevent contact with the juvenile.</li> </ul> <p data-bbox="256 947 1386 1014">2. A juvenile 16 (sixteen) or 17 (seventeen) years old that has been indicted for murder in the first degree may be held with adults. (MN Statute 641.14)</p> <p data-bbox="256 1059 1474 1417">Consistent with the above criteria, this auditor was informed that Olmsted County ADC house detainees 18 and above and do not house juveniles or youth offenders; however, the facility recently housed a 17-year-old adjudicated as an adult due to the severity of his crime. The facility indicated that because the Minnesota Department of Corrections does not require sight and sound separation from adults, and he is adjudicated as an adult, then it would not be required and 115.14 would not be applicable. That youth actually turned 18 in June 2022 and was at the facility during this audit. On August 23rd, the PREA Compliance Office at the USDOJ was emailed to obtain clarification on this standard.</p> <p data-bbox="256 1462 1458 1910">On September 29, 2022, an email from an Impact Justice representative stated, "If there was an inmate in custody at an adult prison or jail, under the age of 18, they are considered a youthful inmate. State law does not preclude federal PREA standards, and the adjudication or certification status of the inmate does not change his/her status as a youthful inmate. If the inmate is in an adult prison/jail under the age of 18, then they must be treated as a youthful inmate and the requirements of Standard 115.14 does apply. That inmate should have been housed separately with sight and sound separation until he turned 18 years of age. The facility could always secure an agreement with a juvenile facility or another adult facility that can meet the standard, to hold the inmate until his 18th birthday, then transfer him in (for future reference)."</p> <p data-bbox="256 1955 1442 2067">In order to comply with this standard, Administration was asked to develop a memo and/or or policy describing how the Olmsted County Adult Detention Center will ensure sight and sound separation of youthful inmates moving forward in order to</p>



	<p>comply with this standard. At the end of the 45-day Interim Phase, this correction had yet to be provided. As a result, this issue was addressed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard. The memo was uploaded as requested and the details listed below, ensuring compliance with this standard.</p> <p>Within a memo dated October 12, 2022, Administration indicated that in the event they are ordered to hold a detainee that is under the age of 18, but adjudicated as an adult by the Minnesota Judicial System they would take the following measures:</p> <ol style="list-style-type: none"> <li>1. An attempt would be made to house the detainee in a juvenile facility.</li> <li>2. If there is no Juvenile Detention Facility available, the Adult Detention Center will house the detainee in special management.</li> <li>3. The detainee will be housed in in a cell alone and only allowed in the sub day area (sound separation).</li> <li>4. Window coverings will be in place so the adult special management detainees cannot see the detainee.</li> <li>5. When the detainee attends programming, they will be with a staff person or volunteer at all times.</li> </ol>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 513.1 / 3-13 'Searches and Contraband Control' and 202.1 / 3-3 'Supervision of Detainees', 807.2 'Additional Privacy Requirements', and PREA Course Completion Forms were reviewed. Interviews with the Training Coordinator/Sergeant, random staff, and random detainees were also conducted to assist with the determination of compliance or non-compliance. In addition, this auditor also observed announcements made when opposite gender staff entered a unit and spoke with the Deputy in the Control Room who pointed out key areas of the facility and the range of vision where strip searches would be completed in the Booking Area, which was appropriate.</p> <p>On August 8, 2021, and on November 18, 2021, a search of a transfemale detainee was thoroughly documented. Her preference of a female staff member conducting the search was honored in both cases, the latter completed by two female staff. Of note, in the search conducted in November 2021, the officer clearly indicated that there was a camera in the room and on her person via a Body Worn Camera (BWC) but informed her that the BWC was not activated. The officer also stated to the</p>

	<p>detainee that she had never conducted a strip search of a transgender individual but that she would be as respectful as possible, undoubtedly easing the detainee's anxiety.</p> <p>Staff will not physically search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee's genital status.</p> <p>Staff of the opposite gender are trained to announce their presence when entering a housing unit when there is not another staff member of opposite gender already assigned to the post. The announcement must be loud enough that detainees can hear the announcement. This was observed during the on-site facility tour.</p> <p>Training documents reviewed indicated that staff have completed appropriate training.</p> <p>In general, female staff can conduct cross-gender searches of male detainees, but male staff cannot conduct cross gender searches unless called upon to assist with a non-compliant female and safety of a deputy or detainee is of concern. Four of thirteen random staff interviewed were not aware of the requirement indicated in 115.15 (b) whereby the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities when female staff are not available to conduct pat-down searches of female inmates, absent exigent circumstances.</p> <p>As part of the corrective action, Administration was asked to ensure standard 115.15 (b)-2 is included in policy such that the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with the provision that male staff do not conduct cross gender searches for female detainees. Furthermore, Administration was asked to re-educate staff on the aforementioned requirement and to provide the training curricula used to educate staff on pat down searches. Evidence of training was provided as requested as was the following link to the PREA Resource Training on 'Guidance in Cross-Gender and Pat Searches Guidance in Cross-Gender and Transgender Pat Searches':  <a href="https://www.prearesourcecenter.org/resource/guidance-cross-gender-and-transgender-pat-searches">https://www.prearesourcecenter.org/resource/guidance-cross-gender-and-transgender-pat-searches</a></p> <p>At the end of the 45-day Interim Phase, while the education and training part of the correction had been provided, the updated policy had not been. During the 180-day Corrective Action Phase, Policy 513.1 / 3-13 'Searches and Contraband Control' was modified to reflect that the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with the provision that male staff do not conduct cross gender searches for female detainees. As a result, this auditor was able to confirm compliance with this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Policy 503.2.1 'Orientation for Non-Readers, Visually Impaired and Deaf or Hard of Hearing Inmates', 602.1 / 11-14 'PREA Disabled and ESL Detainees', as well as the Olmsted County Adult Detention Center PREA Training Power Point were reviewed. Interviews with the Sheriff, Captain/PREA Compliance Manager, random staff, and with a detainee with a disability conducted in order to determine compliance with this standard.

The agency has established policy to provide for educational services for inmates with disabilities to be provided information at intake and assistance on PREA allegations, including reporting. Staff arrange for education in formats for those inmates identified as disabled. Agency policy also addresses the provision of interpreters to those inmates with a non-English primary language.

When inmates arrive at the facility, detainees are immediately provided with a comprehensive facility-based pamphlet entitled, 'End the Silence', which clearly states that the facility has zero tolerance for sexual abuse and harassment complete with definitions, examples of what staff voyeurism is, tips for avoiding sexual abuse and harassment, their right to report and multiple ways they can report any such instances, both within the facility and to an outside agency, etc. English and Spanish posters and announcements on the CCTV were found throughout the facility as well; however, the Programming and Medical Suites were lacking Spanish posters at the time of the onsite audit. When noted by this auditor, the Spanish posters were added to those areas immediately. There should be at least one poster on each housing unit, in English and in Spanish, or at least in areas that are frequented by all detainees and staff. Staff were asked to verify the placement of at least one poster on each unit and in the lobby and share copies of the Spanish posters and pamphlets/handouts that will be available for Spanish-speaking detainees to demonstrate compliance. Examples were sent for review as were pictures demonstrating the placement of Spanish and English posters in housing units as well as Spanish pamphlets of PREA education materials.

Two of thirteen random staff did not know that 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. Administration was asked to re-educate staff on these issues, which they did, and evidence of training was provided as requested. Administration was also asked to provide any examples of contracts with interpretation services and/or any examples of materials used to provide assistance with trainings. At the end of the 45-day Interim Phase, the latter correction had not been provided.

In an attached memo dated July 21, 2022, Administration explains that the agency had two contracts for interpretative services, both a primary and a secondary service; however, there are no longer any contracts utilized. The Adult Detention Center and

	<p>the neighboring Work Release Facility are the only division that still uses it, so it has become a fee for service set up where the agency is invoiced for monthly usage. The Adult Detention Center primarily uses the Language Line Services which can be accessed using the following link: <a href="http://findinterpreters.courts.state.mn.us/">http://findinterpreters.courts.state.mn.us/</a></p> <p>Per an addendum to the original memo of July 21, 2022, and written October 10, 2022, the Adult Detention Center utilizes a ubi-duo device for deaf and hard of hearing detainees as well as Z5 Desktop, which is the industry's premier VRS (video relay service) app. Deaf and hard of hearing detainees can make and receive videophone calls directly from a laptop or desktop computer and is a direct bill pay per use service.</p> <p>This information was addressed and uploaded during the 180-day Corrective Action Phase of the process to achieve compliance with this standard.</p>
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115.17	Hiring and promotion decisions
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Policy 107.1 / 11-15 'PREA Employment and Promotion', 606.3 'PREA Coordinator' policy, criminal background checks, and interviews with the Administrative/Human Resources staff person and the PREA Compliance Manager were reviewed. Also reviewed in determining compliance with this standard was a Background Investigation Packet, which includes a PREA section addressing the questions required in 115.117 (a)-1 that 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: (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.</p> <p>The Olmsted County ADC shall not hire or promote anyone who may have contact with detainees and shall not enlist the 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. An applicant shall not be considered for hire if they have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to refuse; or has been civilly or administratively adjudicated to have engaged in the activity.</p> <p>The agency will ask all applicants and employees who may have contact with detainees directly about previous misconduct in the pre-employment background</p>

	<p>investigation document and during performance evaluation discussions as part of individual job standards ratings.</p> <p>All staff has an ongoing affirmative duty to disclose any such misconduct to their supervisor who will report to their respective captain. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination. Unless prohibited by law the agency will provide information on substantiated allegations of sexual abuse or harassment involving a former employee upon receiving a request and a signed authorization of release from an institutional employer for whom such an employee has applied to work. Criminal history checks are conducted on every employee and contractor every five years. Background checks are accompanied by a PREA background consent form and are maintained in a locked area.</p> <p>Corrective action for this standard included clarifying the four unsigned background check verifications observed during the on-site audit and the five unsigned checks provided in the Pre-Audit Report at the bottom of the staff consent form suggesting they were not reviewed by appropriate staff. This oversight was reportedly due to more than one background check process being utilized within the agency. A memo was uploaded describing that all background investigations are conducted by Crescent Investigations and that each background check is reviewed by at least one Captain and the Chief Deputy/PREA Coordinator. Examples of staff signing off on the three questions in (a)-1 were provided as requested. It was confirmed that the four unsigned background checks had been reviewed and approved for hire and/or promotion; however, the five examples uploaded in the Pre-Audit Questionnaire had not been provided at the end of the 45-day Interim Phase. This issue was addressed during the 180-day Corrective Action Phase in a memo dated November 4, 2022, stating that those five examples were reviewed and cleared by the PREA Coordinator/ Chief Deputy or the PREA Compliance Manager/Captain prior to being hired. As a result, the facility achieved compliance with this standard.</p>
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<b>115.18 Upgrades to facilities and technologies</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Lexipol 606 'PREA Policy' states that when designing or acquiring any new facility and in planning and substantial expansion or modification of existing facilities, the agency will consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect detainees from sexual abuse. When installing or updating monitoring technology, electronic surveillance systems, or other monitoring technology the agency will consider how such technology may enhance the agency's ability to protect detainees from sexual abuse. There were no physical plant modifications since the last PREA audit in 2019, but as the budget has allowed, the facility adds multiple cameras on an annual basis in order to address previously identified blind spots. There are now 106 Exacqvision pan tilt zoom (PTZ) cameras,</p>

	<p>which are integrated into a network through a network video recorder that retains data for up to 160 days. Furthermore, all staff now use Body Worn Cameras (BWC) to further enhance safety as well as staff accountability. Interviews with the Sheriff and PREA Coordinator/Chief Deputy confirmed this approach and these findings. This auditor recommended that any future modifications, including electronic surveillance or changes to the physical plant, should be documented as to how it improves safety from a PREA perspective would be beneficial.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Lexipol 606 'PREA Policy' was reviewed and interviews with random staff, the PREA Compliance Manager, and the Clinical Practice Adviser for the St Mary's Hospital SANE Program were conducted in determining compliance with this standard.</p> <p>The agency offers all victims of sexual abuse a forensic medical examination at St Mary's Hospital without cost where evidentiary or medically appropriate. Sexual Assault Nurse Examiners (SANEs) are available at St Mary's Hospital and will be requested. If SANEs are not available for any reason, the examination may be conducted by other qualified medical practitioners and the agency will document its efforts to provide SANEs; however, a telephone conversation with the Clinical Practice Adviser for the St Mary's Hospital SANE Program indicated there are 13 staff trained, but not certified, as SANEs. If one of these 13 staff are not on duty at the time he or she is needed, then somebody is designated as being on call and they are required to arrive within 30 minutes of a call for their services. For this reason, there would be no instances where detainees would not be evaluated by a SANE trained staff and thus there would be no need to document efforts to secure <u>SAFE</u> or SANE trained individuals. In the past year, there have been no incidents requiring such services.</p> <p>The Olmsted County Adult Detention Center staff will not be responsible for conducting investigations, or evidence collection in the event of a sexual abuse incident. If it appears there has been an incident of sexual abuse the Sheriff's Office detective division will be notified and they will do all the evidence collection as well as the investigation. As a result of the fact that the detectives and the detention staff are all employed by the Sheriff, no memorandum of understanding is necessary. In the event that the alleged abuser is an employee, the evidence would still be collected by the detectives, but the investigation would be handled by another jurisdiction. The jurisdiction that would handle the investigation is dependent on which jurisdiction has the time to conduct the investigation.</p> <p>Evidence that needs to be obtained from a victim's person will be acquired by the hospital emergency department. The contracted medical care company at the detention center will not perform any exams in the event of a sexual abuse case.</p>

	<p>They will only provide emergency care in the event of an external trauma injury.</p> <p>Phone calls by detainees to Olmsted County Victims Services made to the designated number automatically provide the same level of privacy afforded those detainees contacting their attorneys. This means those conversations are confidential and no longer monitored.</p> <p>There were no incidents of sexual assault in the past year, thus no detainee was interviewed to assist in determining compliance.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 606.3 / 11-3 'PREA Responsive Planning' and 606.14 'Sexual Abuse Victims' was reviewed and interviews with the Olmsted County Sheriff and Investigative Staff were conducted in order to determine compliance. In addition, the Olmsted County website was reviewed, which states that Olmsted County ADC has a zero tolerance policy for sexual abuse and harassment and emphasizes third party reporting for any knowledge of sexual assault and harassment with multiple contact numbers provided in-house or outside the agency.</p> <p>The Olmsted County Adult Detention Center staff will not be responsible for conducting investigations, or evidence collection in the event of a sexual abuse incident. If it appears there has been an incident of sexual abuse the Sheriff's Office detective division will be notified and they will do all the evidence collection as well as the investigation. As a result of the fact that the detectives and the detention staff are all employed by the Sheriff, no memorandum of understanding is necessary. In the event that the alleged abuser is an employee, the evidence would still be collected by our detectives, but the investigation would be handled by another jurisdiction. The jurisdiction that would handle the investigation is dependent on which jurisdiction has the time to conduct the investigation.</p> <p>Evidence that needs to be obtained from a victim's person will be acquired by the emergency department. The contracted medical care company at the detention center will not perform any exams in the event of a sexual abuse case. They will only provide emergency care in the event of an external trauma injury.</p> <p>Corrective action included Administration developing and/or uploading policy addressing all aspects of this standard, which they did. In addition, a publication (website or paper) that describes investigative responsibilities of both the agency and the separate entity that conducts criminal investigations for the agency, if applicable, needs to be posted on the website. Within the Corrective Action Phase of the audit process, this information was posted on the agency website and the facility was determined to be compliant with this standard.</p>



<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 305.1 / 2-20 'Training Requirements', 309.3 'Member Training', and the PREA Training Curriculum were reviewed. Interviews with the PREA Compliance Manager and training staff were also conducted in order to determine compliance with this standard.</p> <p>The agency policy requires annual training for all staff in all areas identified within the standard. The staff receive a refresher training every two years. Interviews with staff confirmed they completed training and understand the material presented. Employee training documentation found that all staff had completed their training (PREA: Sexual Abuse and Sexual Harassment 101). Staff were able to articulate the training they had received.</p> <p>All staff are trained on the Prison Rape Elimination Act (PREA) within the first year of employment and receive a refresher every two years to include the following;</p> <ol style="list-style-type: none"> <li>1. The zero tolerance policy for sexual abuse and sexual harassment</li> <li>2. How to fulfill their responsibilities under the PREA policies</li> <li>3. Detainee's rights to be free from sexual harassment or sexual abuse</li> <li>4. The rights of detainees and employees to be free of retaliation for reporting sexual abuse or sexual harassment</li> <li>5. The dynamics of sexual abuse and sexual harassment in confinement</li> <li>6. The common reactions of sexual abuse and sexual harassment victims</li> <li>7. How to detect and respond to signs of threatened or actual sexual abuse</li> <li>8. How to avoid inappropriate relationships with inmates</li> <li>9. How to communicate effectively and professionally with detainees, including those that identify as lesbian, gay, bisexual, transgender, intersex, or gender nonconforming</li> <li>10. How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities</li> </ol> <p>Administration was asked to modify their training curriculum to include element # 3 and #10 to the basic PREA training PowerPoint: (#3) "Residents' rights to be free from sexual abuse and sexual harassment" and #10 "How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.</p> <p>Corrective action includes providing key points on a sheet and have staff sign off that the training has been received and is understood. Administration was required to upload the modified basic PREA training and provide the training sheets with signatures as verification for each resident to ensure compliance. At the end of the 45-day Interim Phase, the required corrections were still in progress. As a result, these changes were addressed and uploaded during the 180-day Corrective Action Phase of the process and this auditor confirmed compliance with this standard.</p>



<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The 606 Lexipol 'PREA Policy', the 'PREA Contractor and Volunteer Training' and post-test, 'Civilian Acknowledgement/Understanding of ADC PREA Policy and Guidelines' form, 'Court Security Staff Acknowledgement/Understanding of ADC PREA Policy and Guidelines' form, and 'PREA Volunteer Acknowledgement' form were all reviewed. Interviews with a volunteer and the Training Coordinator also confirmed training. The agency requires all volunteers to complete the same training as staff. Interviews showed that there was an understanding on how and who to report any instances of sexual abuse and harassment, if needed.</p> <p>All support staff with regular or daily contact with detainees receive 40 hours of training in addition to orientation training during their first year of employment. This includes Non-Security Staff Training, Direct Supervision, PREA, and 40 hours of training each year thereafter.</p> <p>Corrective action included Administration uploading examples of completed forms, not just the templates, which was completed. The forms all indicate that the staff receiving the training not only received it, but that they understood it as well. As a result, the Adult Detention Center was considered compliant with this standard.</p>

<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Lexipol 606 'PREA Policy', 606.4 / 11-4 'PREA Detainee Education', 503.6 'Initial Orientation', 503.7 'Orientation for Non-Readers, Visually Impaired, and Deaf or Hard-of Hearing Inmates', the Detainee Handbook, the 'Turnkey PREA Acknowledgement' form, and the updated PREA Brochure and Zero Tolerance / End the Silence posters in English and Spanish were reviewed. Furthermore, multiple interviews and informal conversations with detainees and staff, including Intake Staff, who reviewed the process with this auditor, were all considered in determining compliance with this standard.</p> <p>Interviews with detainees confirmed the receipt of facility specific information at intake. Informational posters in both English and Spanish were observed around the facility on the PREA boards in the housing areas.</p> <p>During the Booking process, detainees receive information explaining the agencies zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions. A comprehensive education session will be provided to</p>

	<p>detainees within 30 days of their admittance. This education session may be in person or through video. The education session will cover their rights to be free from sexual abuse and sexual harassment and cover agency policy and procedure on response to reported incidents. The agency provides education in formats accessible to all detainees, including those who are limited in English proficiency, deaf, visually impaired, or otherwise disabled, as well as to detainees who have limited reading skills. The Programs Division will maintain documentation of detainee participation in any education sessions. Key information is continuously and readily available in one or all of the following formats: the detainee handbook, PREA brochures, on the kiosk, and on the CCTV.</p> <p>Regarding the requirement for detainees to receive the PREA education within thirty days of their arrival to the facility, only five of eleven detainees had been at the facility for thirty days or longer. One of the five refused the PREA education video and another was not recorded but had Administration assurances it had been completed as required. The other three had completed the training on time. Administration was asked to provide evidence that the detainee had received the required 30-day education. At the end of the 45-day Interim Phase, the required documentation had yet to be uploaded. As a result, the PREA training was provided to the detainee in question and was uploaded and confirmed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard.</p>
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115.34	Specialized training: Investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>The Olmsted County Adult Detention Center staff will not be responsible for conducting investigations, or evidence collection in the event of a sexual abuse incident. If it appears there has been an incident of sexual abuse the Sheriff's Office detective division will be notified and they will do all the evidence collection as well as the investigation. As a result of the fact that the detectives and the detention staff are all employed by the Sheriff, no memorandum of understanding is necessary. In the event that the alleged abuser is an employee, the evidence would still be collected by our detectives, but the investigation would be handled by another jurisdiction. The jurisdiction that would handle the investigation is dependent on which jurisdiction has the time to conduct the investigation.</p> <p>Evidence that needs to be obtained from a victim's person will be acquired by the emergency department. The contracted medical care company at the detention center will not perform any exams in the event of a sexual abuse case. They will only provide emergency care in the event of an external trauma injury.</p> <p>Investigations will be conducted promptly, thoroughly, and objectively for all</p>

allegations, including third party reports. Where sexual abuse is alleged, the agency will use investigators who have received special training in sexual abuse investigations pursuant to 115.34 and 115.234. Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; will interview alleged victims, suspected perpetrators, and witnesses; and will review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency will conduct compelled interviews only after consulting with the County Attorney's Office as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person's status as a detainee or staff. The agency will not require a detainee who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation. Administrative investigations will include an effort to determine whether staff actions or failures to act contributed to the abuse and will 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. Criminal investigations will be done by the Olmsted County Sheriff's Office Investigations Division and 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. Substantiated allegations of conduct that appears to be criminal will be referred for prosecution. The investigation may be referred to an outside agency if staff are alleged to be involved. The agency will retain all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus seven years. The departure of the alleged abuser or victim from the employment or control of the facility will not provide a basis for terminating an investigation. The agency will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (CFR 115.72 and 115.272).

Because some cases have no clear delineation as to whether or not a criminal offense occurred and it may be some time before the information can be collected to warrant calling in the detectives to investigate it, Administration was asked to have the PREA Compliance Manager/Captain complete the National Institute of Corrections web-based training "PREA: Investigating Sexual Abuse in a Confinement Setting" and the Captain of Investigations and Security Services at the Sheriff's Office, complete both the basic and advanced investigations trainings: "PREA: Investigating Sexual Abuse in a Confinement Setting" and "PREA: Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations". Administration was asked to send confirmation of completion for evidence of compliance. At the end of the 45-day Interim Phase, the required corrective actions were still in progress. As a result, this issue was addressed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard. It shall be noted that due to technical difficulties, the Captain of Investigations and Security Services at the Sheriff's Office was unable to complete the Advanced Investigations course as requested; however, though recommended, it is not required to achieve compliance.

115.35	<b>Specialized training: Medical and mental health care</b>
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1453 667">Policy 309.4 'Specialized Medical Training' and 606.10 / 11-11 'PREA Medical and Mental Health' were reviewed and interviews with a medical and mental health staff person were conducted. Training records for one of the contracted staff members was also provided for review. All of these factors were considered in determining compliance with this standard. It shall be noted that Advanced Correctional Healthcare, Inc., became the new medical and mental health provider in June 2022 and the agency is still working to hire the necessary staff to provide the required services.</p> <p data-bbox="256 703 1469 1115">The Olmsted County Adult Detention Center staff will not be responsible for conducting investigations, or evidence collection in the event of a sexual abuse incident. If it appears there has been an incident of sexual abuse, the Sheriff's Office detective division will be notified and they will do all the evidence collection as well as the investigation. As a result of the fact that the detectives and the detention staff are all employed by the Sheriff, no memorandum of understanding is necessary. In the event that the alleged abuser is an employee, the evidence would still be collected by our detectives, but the investigation would be handled by another jurisdiction. The jurisdiction that would handle the investigation is dependent on which jurisdiction has the time to conduct the investigation.</p> <p data-bbox="256 1151 1465 1317">Evidence that needs to be obtained from a victim's person will be acquired by the emergency department. The contracted medical care company at the detention center will not perform any exams in the event of a sexual abuse case. They will only provide emergency care in the event of an external trauma injury.</p> <p data-bbox="256 1352 1477 2056">Investigations will be conducted promptly, thoroughly, and objectively for all allegations, including third party reports. Where sexual abuse is alleged, the agency will use investigators who have received special training in sexual abuse investigations pursuant to 115.34 and 115.234. Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; will interview alleged victims, suspected perpetrators, and witnesses; and will review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency will conduct compelled interviews only after consulting with the County Attorney's Office as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and will not be determined by the person's status as a detainee or staff. The agency will not require a detainee who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation. Administrative investigations will include an effort to determine whether staff actions or failures to act contributed to the abuse and will</p>

	<p>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. Criminal investigations will be done by the Olmsted County Sheriff's Office Investigations Division and 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. Substantiated allegations of conduct that appears to be criminal will be referred for prosecution. The investigation may be referred to an outside agency if staff are alleged to be involved. The agency will retain all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus seven years. The departure of the alleged abuser or victim from the employment or control of the facility will not provide a basis for terminating an investigation. The agency will impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (CFR 115.72 and 115.272).</p> <p>Regarding corrective action, Administration was asked to have all medical staff complete the NIC web-based trainings, "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting" and all Mental Health staff complete the "PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting". Administration was then asked to upload the roster of medical and mental health staff and verification that the training has been completed for compliance. At the end of the 45-day Interim Phase, the required corrections were still in progress. As a result, the requested documentation was uploaded and reviewed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard. A memo dated October 14, 2022, indicated that the two full-time RN's that had worked at the facility had resigned and that any medical staff hired thereafter would be required to complete the aforementioned training. On November 17, 2022, Administration uploaded the mental health staff's certificate of completion for the behavioral health training as requested and the standard was determined to be compliant.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 507.2/11-5 PREA Risk Screening and 507.3 'Classification Plan' and a risk screening sample were reviewed. A selection of detainee files were also reviewed and discussions and interviews conducted with the PREA Compliance Manager, Intake staff, those staff who screen for risk, and random staff and detainees in the effort to ensure compliance.</p> <p>Policy requires that screening for risk of victimization and abusiveness is conducted during the initial Booking process. This does not include book and release detainees. Within 30 days of a detainee's arrival the detainees are reassessed for risk of</p>

victimization or abusiveness based upon any additional, relevant information received since the intake screening. Detainees transferred to another Olmsted County facility are assessed for risk of being sexually abused or sexually abusive. Results of the screening are sent to the receiving facility. A detainee's initial risk screening results, if they were determined as high risk and if they were involved in any PREA relate incident, are forwarded to facilities outside Olmsted County. This information will be on/and attached to the transfer form.

Standards require that both High Risk Abusers and Victimizers are identified in order to provide appropriate protections. The system utilized at the time of the on-site visit did not specifically assign them to those categories, where applicable, and the system for tracking them needed improvement.

Eleven of eleven random detainees received the currently used risk assessment intake screen within 72 hours of arrival to the facility with all but one of them receiving the screening within the same day of arrival. A review of records indicated that four of four random detainees interviewed that had been housed at the facility for more than thirty days had been re-screened as required.

During the tour and interview process, it was observed and learned that there was minimal privacy when conducting PREA Risk Screenings in the Booking area. On September 14, 2022, and in response to this identified concern, an email was sent to the Booking staff from the Booking sergeant that was uploaded in response to this concern. Within the email, it states, "When completing bookings make sure the detainee is standing between the glass partitions and do not allow other detainees to be standing near the individual answering the questions. Be mindful that we are asking personal and sensitive questions during the booking process, so it is important to give the individual space to answer the questions."

Another concern with this standard is that the screening tool is not objective as required per 115.41 (c). Rather, it is subjective as to what and who is identified as being at risk for abusiveness and/or victimization. The facility was challenged with the idea of convincing this auditor in writing that their process is objective rather than subjective. If not, corrective action would include either modifying the current tool, working with the PREA Resource Center to identify and implement a recommended tool for the facility to use moving forward, or use the tool this auditor sent on August 29, 2022, that is utilized at a different facility along with the policy that was adopted by another program. Administration was then asked to upload the new or modified tool, changes to the policy, develop a spreadsheet to monitor the results of new admissions for two weeks (including name, date, and results), and upload at least five examples of its use.

At the end of the 45-day Interim Phase, the required corrections were still in progress. As a result, these corrective actions were addressed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard. As requested, Administration uploaded the modified tool, changes to the scoring policy referred to as the 'Initial Classification Scoring Explanation', developed a spreadsheet to monitor the results of new admissions for two weeks (including name, date, and results), and uploaded five examples of its use. As a result of the changes made by

	the facility, compliance with this standard was achieved.
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 507.3 'Classification Plan' and the 'Consideration for Placement of Transgender or Intersex Inmates' form were reviewed. Interviews with the PREA Coordinator, PREA Compliance Manager, Intake staff, and those staff responsible for screening for risk were conducted. The policy addresses clear guidelines, including limits, for housing and work assignments based on the safety of all inmates. The policy requires a bi-annual review of housing for transgender and intersex inmates. The policy also provides for all transgender and intersex inmates to shower separately from all other inmates and are assessed for their own perception of risk at the facility.</p> <p>The Program Sergeant will be responsible to ensure that males and females are provided equal opportunities for participation in programs and services. The Program Staff will develop schedules and turn them into the Program Sergeant for review and approval. Males and females will be provided separate sleeping quarters but equal access to all available services and programs. Neither sex is denied opportunities solely on the basis of their smaller number in the population. Detainees placed in involuntary segregation housing as a result of being considered a risk of sexual victimization in accordance with (CFR 115.43 (a)), will have access to programs privileges, education and work opportunities to the extent possible. If access is restricted the facility shall document the restriction including what opportunities have been limited, the duration of the limitation and the reason for the limitation. During the booking process, detainees displaying special needs, high risk of victimization, and transgender or intersex may be kept in booking, placed on sub dayroom status in intake or housed in the special management unit. If the detainee is being booked at the work release facility, they will be moved to the detention center and housed as dictated above until they can be evaluated by the Classification Committee. The duty sergeant or corporal will write a report documenting the reasons for the special housing and forward it to administration.</p> <p>During the tour and interview process, it was observed and learned that there was minimal privacy when conducting PREA Risk Screenings in the Booking area. On September 14, 2022, and in response to this identified concern, an email was sent to the Booking staff from the Booking sergeant that was uploaded in response to this concern. Within the email, it states, "When completing bookings make sure the detainee is standing between the glass partitions and do not allow other detainees to be standing near the individual answering the questions. Be mindful that we are asking personal and sensitive questions during the booking process, so it is important to give the individual space to answer the questions."</p> <p>Corrective action involved Administration uploading the policy that addresses the</p>

	specific elements of this policy and examples of risk assessments that informed decisions related to housing, bed, work, education and/or programming. At the end of the 45-day Interim Phase, the required corrections were still in progress. As a result, these issues were addressed in policy and uploaded during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard.
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policies 507.10 'Prison Rape Elimination Act (PREA) Considerations' and 605.1 / 8-9 'Protection from Harm' were reviewed. Interviews were conducted with the PREA Coordinator and PREA Compliance Manager in the determination of compliance.</p> <p>The Classification Committee will review the status of detainees in special management, administrative segregation, and protective custody, including those placed as a result of being identified as a high risk of victimization of sexual abuse or high risk of being sexually abusive. This review will be conducted every seven days for the first two months and at least once every thirty days thereafter. The review will be recorded in the detainee's file jacket.</p> <p>Detainees placed in involuntary segregation housing as a result of being considered a risk of sexual victimization in accordance with policy, will have access to programs privileges, education and work opportunities to the extent possible. If access is restricted, the facility documents the restriction including what opportunities have been limited, the duration of the limitation and the reason for the limitation. When any staff member, volunteer, or contractor becomes aware that a detainee is subject to a substantial risk of imminent sexual abuse, they will take immediate action to protect the detainee. Detainees determined to be high risk will be housed according to policy 9-07 F "Detainee Classification". Detainees determined to be a high risk for sexual victimization will not be placed in involuntary segregation, unless the Classification Committee cannot assess housing options immediately. During times when the classification committee is not available to make a housing assessment the duty sergeant or corporal may place someone on involuntary segregation. Involuntary segregation will not exceed 24 hours.</p> <p>At the end of the 45-day Interim Phase, requested documentation had not been uploaded. As a result, the information was uploaded during the 180-day Corrective Action Phase of the process, including the modified tool and changes to the scoring policy referred to as the 'Initial Classification Scoring Explanation'. As a result of the changes made by the facility and documentation provided, compliance with this standard was achieved.</p>



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<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.4 'Reporting Sexual Abuse and Harassment and Retaliation', 606.5 / 11-6 'PREA Reporting', 606.14 'Sexual Abuse Victims'; 606.3 / 11-3 'PREA Responsive Planning', 606.4.1 'Consular Notification', the PREA training PowerPoint, 'Turnkey PREA Acknowledgement' form, the Detainee Handbook, PREA brochure / 'End the Silence' in both English and Spanish were reviewed, a tour of the facility was completed noting PREA 'End the Silence' Posters, a documented Narrative Report dated 7-13-20 in which a sexual harassment claim about a fellow detainee was made to staff and their response, discussions and interviews with random staff and detainees were all reviewed or conducted in determining compliance with this standard.</p> <p>The agency will provide multiple ways for detainees to privately report sexual abuse and sexual harassment, retaliation by other detainees or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. At least one method will include the ability to report to an entity that is not part of the agency.</p> <ul style="list-style-type: none"> <li>• Request via the kiosk to captain of operations</li> <li>• Request via the kiosk to nursing</li> <li>• Phone call to the Olmsted County Victim Services crisis line that is programmed to be free of charge</li> <li>• In person to any staff at any time</li> <li>• Staff accepts reports made verbally, in writing, anonymously, and from third parties and will promptly document any verbal reports.</li> <li>• Staff may report sexual abuse and sexual harassment of detainees at any time to any member of the command staff that they are comfortable with.</li> </ul> <p>The agency provides detainees with access to outside victim advocates for emotional support services related to sexual abuse by giving detainees mailing addresses and telephone numbers, including toll free hot line numbers and immigration service agencies for person(s) detained for the sole purpose of civil immigration. The organization will enable reasonable communication between detainees and these agencies, in as confidential a manner as possible, and will inform detainees to the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded in accordance with mandatory reporting laws.</p> <p>The following language is located on the Olmsted County Sheriff's Office website and on the lobby kiosk in the detention center: The Olmsted County Adult Detention Center has a zero tolerance policy regarding sexual abuse and sexual harassment. If</p>

	<p>you are aware of any detainee, volunteer or staff person that is experiencing or has experienced sexual abuse or harassment, please use any of the following methods to report:</p> <ol style="list-style-type: none"> <li>1. Contact the director of detention services during business hours at 507-328-6837.</li> <li>2. Contact the on duty supervisor any time at 507-328-6791.</li> <li>3. Contact law enforcement dispatch any time at 507-328-6800.</li> <li>4. Contact Olmsted County Victim Services crisis line any time at 507-289-0636.</li> </ol> <p>A conversation with the Interim Program Manager and a Victim Advocate for Olmsted County Victims Services, indicated that upon request a victim advocate would meet the detainee at St Mary's Hospital within 30 minutes of the call, if requested.</p> <p>In a memo entitled 'Victim Services Contact Information', dated September 16, 2022, from the PREA Compliance Manager and in response to this auditor's request for more specific information regarding the contact that addresses standard 115.51 (b)-1 a detainee may contact Olmsted County Victim Services and can be reached free of charge at 507-289-0636.</p> <p>Any phone calls to Olmsted County Victims Services made to the designated number automatically provide the same level of privacy afforded those detainees contacting their attorneys. This means those conversations are confidential and not monitored. Four of seven random residents interviewed were not aware of this and required re-education as part of the required corrective action. Administration was also asked to provide refresher training for residents that reports of sexual abuse and/or sexual harassment can be made anonymously as two of eleven random residents interviewed were not certain of this. Corrective action included providing key points on a sheet and have residents sign off that the training has been received and is understood. The training sheets were uploaded with signatures as verification for each resident to ensure compliance. This information was uploaded as requested and the standard was determined to be compliant thereafter.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policies 610.1 / 8-5 'Detainee Grievance', 610.6 'Additional Provisions for Grievances Related to Sexual Abuse', and 610/1 / 8-5 'Detainee Grievance' were reviewed. Interviews were also conducted with the PREA Compliance Manager, random staff, and detainees in the interest of determining compliance with this standard.</p> <p>A detainee may file a grievance at any time to bring a problem to staff's attention or</p>

	<p>to appeal a specific action such as a disciplinary sanction. A detainee may file a grievance only for him or herself, although a detainee may assist another detainee in filing a grievance if they are unable to do so themselves. Third parties including detainees, staff members, family members, attorneys or others shall be permitted to assist a detainee in filing requests for administrative remedies relating to sexual abuse and will also be permitted to file such requests on the detainee's behalf. A detainee may withdraw a previously filed grievance anytime. If a detainee declines to have a request processed on their behalf in situations of alleged sexual abuse, the administration will document the detainee's decision.</p> <p>The ADC may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the detainee filed the grievance in bad faith. A detainee may file a formal grievance any time within 15 days of an event, unless it is an allegation of sexual abuse. There is no time limit on submitting a grievance regarding an allegation of sexual abuse. The grievance will be submitted electronically and should include date, time and all persons involved in the incident, as well as the date and time of the filing of the formal grievance. If the kiosk is not working or a detainee is on lock down status, they may submit a paper request form. All grievances are sent electronically to either the Administrative or Operations Captain and then forwarded to the corresponding Duty Supervisor or PREA Compliance Manager for investigation, unless the grievance is against the Duty Supervisor or PREA Compliance Manager. Emergency grievances are those involving an immediate threat to the welfare or safety of a detainee or if the detainee is subject to a substantial risk of imminent sexual abuse. Receiving staff will forward the grievance directly to the Duty Supervisor.</p> <p>For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>Corrective action included either providing evidence and/or uploading policy that addressed 115.52 (c), all the elements of 115.52 (d) and 115.52 (f), and 115.52 (b) 2,3, and 4 in policy and practice. Administration was also asked to upload the grievance referred to in the Pre-Audit Questionnaire regarding a detainee that filed a grievance claiming sexual assault by staff on October 26, 2021, but had refused to be interviewed the following day. At the end of the 45-day Interim Phase, the required corrections were still in progress. These items were uploaded, reviewed, and the facility was determined to achieve compliance with this standard during the 180-day Corrective Action Phase.</p>
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<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Policy 606.4 'Reporting Sexual Abuse, Harassment, and Retaliation', 606.5 / 11-6 'PREA Reporting', the 'PREA Turnkey Acknowledgement' form, and a Memorandum of Understanding (MOU) with Olmsted County Victim Services for advocacy services dated August 14, 2019, were all reviewed in determining compliance with this standard. Furthermore, this auditor contacted the Olmsted County Victim Services number as well as interviewed random staff and detainees and had discussions regarding the process and procedure with the PREA Compliance Manager.</p> <p>The agency provides detainees with access to outside victim advocates for emotional support services related to sexual abuse by giving detainees mailing addresses and telephone numbers, including toll free hot line numbers and immigration service agencies for person(s) detained for the sole purpose of civil immigration. The organization enables reasonable communication between detainees and these agencies, in as confidential a manner as possible, and will inform detainees to the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded in accordance with mandatory reporting laws.</p> <p>A conversation with the Interim Program Manager and a Victim Advocate for Olmsted County Victims Services, indicated that a victim advocate would meet the detainee at St Mary's Hospital within 30 minutes of the call, if requested. Any phone calls to Olmsted County Victims Services made to the designated number automatically provide the same level of privacy afforded those detainees contacting their attorneys. This means those conversations are confidential and not monitored. Four of seven random residents interviewed were not aware of this and re-education for the detainees was requested as part of corrective action.</p> <p>Administration was also asked to provide refresher training for residents that there are services available outside of the facility for dealing with sexual abuse and what they are, if it was needed. Four of eleven random residents were not certain that there are services available, and two of seven residents were not aware of what services are available outside of the facility for dealing with sexual abuse or they would answer without confidence. Administration was asked to provide key points on a sheet and have residents sign off that the training has been received and is understood. Training sheets were provided with signatures as verification for each resident staff to ensure compliance. This information was uploaded as requested and the standard was determined to be compliant thereafter.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Lexipol 606 'PREA Policy', the Olmsted County Sheriff's Office website, the Detainee Handbook, updated PREA / 'End the Silence' brochures and Zero Tolerance posters in both English and Spanish were reviewed. Interviews were conducted with the PREA

	<p>Compliance Manager, random staff and detainees in the interest of determining compliance with this standard.</p> <p>The Olmsted County Sherriff's Office offers opportunities for third party reporting and accepts third party reports. Information on how to report sexual abuse or harassment is provided on their agency website. <a href="#">About the Adult Detention Center (ADC)   Olmsted County, MN</a>. This information is also available at the facility for visitors via Closed Circuit Television (CCTV) images in the lobby of the Olmsted County Sheriff's Office. A conversation with the Interim Program Manager and a Victim Advocate for Olmsted County Victims Services, indicated that third party reports are accepted.</p> <p>The following language is on the Olmsted County Sheriff's Office website and on the lobby kiosk in the detention center: The Olmsted County Adult Detention Center has a zero tolerance policy regarding sexual abuse and sexual harassment. If you are aware of any detainee, volunteer or staff person that is experiencing or has experienced sexual abuse or harassment, please use any of the following methods to report:</p> <ol style="list-style-type: none"> <li>1. Contact the director of detention services during business hours at 507-328-6837.</li> <li>2. Contact the on duty supervisor any time at 507-328-6791.</li> <li>3. Contact law enforcement dispatch any time at 507-328-6800.</li> <li>4. Contact Olmsted County Victim Services crisis line any time at 507-289-0636.</li> </ol> <p>As a result of the aforementioned factors, this standard was considered to be compliant.</p>
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115.61	Staff and agency reporting duties
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Lexipol 606 'PREA Policy', 606.4 'Reporting Sexual Abuse, Harassment and Retaliation', and 606.5 / 11-6 'PREA Reporting' was reviewed. Staff interviews with medical staff and the PREA Compliance Manager were conducted and was determined that corrective action was necessary as a result and as described in the last paragraph in this section.</p> <p>The agency policy requires all staff, volunteers and contractors to immediately report any knowledge, information or suspicion of sexual abuse or sexual harassment, and any violation or neglect of responsibility, to administration. Policy and interviews confirmed that staff are not allowed to share information with anyone who does not have a need to know. Agency staff training details the notification to the state agency regarding vulnerable adults.</p>

	<p>All staff are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Apart from reporting to supervisors, staff will not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions.</p> <p>Medical and mental health practitioners are required to report sexual abuse and to inform detainees of the practitioners' duty to report, and the limitations of confidentiality, at the initiation of service. If the alleged victim is under 18 or considered a vulnerable adult under Minnesota Statute 626.557, the agency will report the allegation to Adult Protection Services. All allegations of sexual abuse and sexual harassment, including third party and anonymous reports will be reported to the Investigations supervisor for the Rochester Police Department or the Sheriff's Office.</p> <p>As part of corrective action, Administration was asked to provide refresher training to medical and mental health that they are required to inform detainees of the practitioners' duty to report, and the limitations of confidentiality, at the initiation of service. Staff interviewed were not clear on this requirement. Administration was asked to provide training points on a sheet/PowerPoint and have staff sign off that each medical/mental health staff received and understood the training provided. The requested training and signature sheets were completed and uploaded. As a result, and in conjunction with the information described above, this standard was considered compliant.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 605.1 / 8-9 'Protection From Harm' was reviewed. Interviews with the Sheriff, Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager, and random staff confirmed findings.</p> <p>The agency requires immediate action to protect inmates who report sexual abuse. All staff, contractors and volunteers are required to take immediate action to protect detainees from imminent sexual abuse and report to administration who will assist with taking appropriate steps for protection. Staff were able to articulate this requirement during the interviews. As a result of the aforementioned factors, this standard was determined to be compliant.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.5 / 11-4 'PREA Reporting', 606.4.1 'Reporting to Other Facilities', 606.6 / 11-7 'PREA Response to Detainee Report' as well as an example documented in a Narrative Report dated January 7, 2021, were reviewed. Staff interviews with the Sheriff, Chief Deputy/PREA Coordinator, and Captain/PREA Compliance Manager confirmed findings and were all used in determining compliance with this standard.</p> <p>Upon receiving an allegation that a detainee was sexually abused while confined at another facility, the director or designee will notify the head of the facility or the agency where the alleged abused occurred as soon as possible but no later than 72 hours after receiving the allegation. If the allegation is reported on a weekend or a holiday, the duty supervisor will notify the chief deputy by phone during day hours or by email during the overnight hours. If the director is not available, the operations captain will be notified. The director or designee will document such notification.</p> <p>When the ADC receives such notification, the Director will ensure that the allegation is investigated in accordance with these standards. If notification is made to the ADC from another agency, it will be investigated in accordance with PREA standards.</p> <p>The Narrative Report dated January 7, 2021, involved an incident initially brought to the attention of the PREA Compliance Manager the previous day via an email. The detainee had reported he had been sexually abused at a different facility. After being interviewed by the PREA Compliance Manager the following day after receiving the email on January 6, 2021, she contacted the facility where the abuse allegedly had occurred and notified a Lieutenant at the facility. While this was managed well and the documentation was comprehensive, Olmsted County was informed that moving forward any future claims require the facility head to notify the facility head of the other facility per this standard or at a minimum indicate the reason why this was not possible.</p> <p>Corrective action required administration to upload the relevant policy that addresses this standard, which resulted in the 'PREA Response to Detainee Report' being uploaded as requested. As a result of the aforementioned factors, this standard was considered to be compliant.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.6 'First Responders', 606.13 / 11-16 'PREA First Responder Duties', and the 'Olmsted First Responder Sexual Assault Response Checklist' were reviewed and</p>



	<p>considered in determining compliance with this standard. Random staff and Security Staff First Responder interviews also confirmed findings.</p> <p>Upon learning of an allegation of sexual abuse, the first responding security staff member will:</p> <ul style="list-style-type: none"> <li>• Separate the alleged victim and abuser</li> <li>• Preserve and protect the crime scene until appropriate steps can be taken to collect evidence\</li> <li>• Request that the alleged victim not take any actions that could destroy physical evidence including: washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.</li> <li>• Ensure the alleged abuser does not take any actions that could destroy physical evidence, as above.</li> <li>• If the first staff responder is not security staff, the responder will request that the victim not take any action that could destroy physical evidence and then notify security staff.</li> </ul> <p>As a result of the aforementioned factors, this standard was considered to be compliant.</p>
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115.65	Coordinated response
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Lexipol 606 'PREA Policy', Policy 606.3 'PREA Coordinator', and Policy 606.6 / 11-7 'PREA Response to Detainee Report' were reviewed. Furthermore, interviews with the Olmsted County Sheriff and the Chief Deputy/PREA Coordinator were conducted and used in determining compliance with this standard. The Director of Detention Services or designee will act as the incident commander to coordinate the response to an incident of sexual abuse. The Director or designee will direct first responders, medical and mental health practitioners and contractors, investigators, and facility leadership.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>In determining compliance with this standard, the Lexipol 606 'PREA Policy' was reviewed as were the labor agreements between the County of Olmsted, Minnesota</p>



	and the Olmsted County Deputy Sheriff's Association as well as the labor agreement between the County of Olmsted, Minnesota and the Law Enforcement Labor Services, Inc for Captains and another for Sergeants. The agency is not entered into any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual assault abusers from contact with any detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.5 'Retaliation' and 606.6 /11-7 'PREA Response to Detainee Report' was reviewed. Interviews with the Olmsted County Sheriff, Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager, and staff monitoring retaliation confirmed findings.</p> <p>The agency protects all detainees and staff who report sexual abuse or sexual harassment or cooperate with investigations from retaliation by other detainees or staff. The Director or designee is charged with monitoring retaliation. The agency will employ any necessary protection measures, such as housing changes, transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff that fear retaliation for reporting or cooperating with investigations.</p> <p>For at least 90 days following a report of sexual abuse, the agency will monitor the conduct and treatment of detainees or staff who reported the sexual abuse and of detainees who were reported to have suffered sexual abuse to see if there are changes that may suggest retaliation. The program sergeant or work release sergeant will monitor retaliation against detainees and the respective captains will monitor retaliation against staff. They will monitor detainee disciplinary reports, housing or program changes, negative performance reviews or reassignments of staff. The monitoring will continue beyond 90 days if the initial monitoring indicates a continued need. Such monitoring will include status checks with detainees. If other individuals who cooperate with an investigation express fear of retaliation, the agency will take appropriate measures to protect them. The obligation to monitor will terminate if the allegation is unfounded.</p> <p>As a result of the aforementioned factors, this standard was considered to be compliant.</p>

<b>115.68</b>	<b>Post-allegation protective custody</b>
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	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Policy 507.10 'Prison Rape Elimination Act (PREA) Considerations' and 605.1 / 8-9 'Protection from Harm' were reviewed in consideration of determining compliance with this standard. Staff interviews with the PREA Compliance Manager and staff who supervise detainees in segregated housing were used to confirm findings.</p> <p>In situations where physical force or disciplinary detention is required, only the least drastic means necessary to secure order will be used. Administrative segregation will be used when a detainee is a threat to themselves or others in order to protect all persons within the facility. Protective custody housing will be provided to detainees who are believed by staff to be vulnerable.</p> <p>Detainees classified as Special Management will be housed individually or with another Special Management classified detainee. If the detainee classified as special management is housed in the Intake housing area, they will be housed in a lower level cell with a sub-day room. When any staff member, volunteer, or contractor becomes aware that a detainee is subject to a substantial risk of imminent sexual abuse, they will take immediate action to protect the detainee. Detainees determined to be high risk will be housed according to policy 9-07 F 'Detainee Classification'. Detainees determined to be a high risk for sexual victimization will not be placed in involuntary segregation, unless the classification committee cannot assess housing options immediately. During times when the classification committee is not available to make a housing assessment the duty sergeant or corporal may place someone on involuntary segregation. Involuntary segregation will not exceed 24 hours. If involuntary segregated housing occurs, documentation will be completed that includes the basis for the facilities concerns of the inmates' safety and the reason why no alternative means of separation can be arranged. Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse will be subject to the requirements of CFR 115.43 including paragraph F and G of this policy.</p> <p>Corrective action includes a request to upload a completed initial risk assessment for a detainee that is placed in an involuntary segregated housing assignment and then a risk assessment every 30 days to determine whether there is a continuing need for separation from the general population. Also, Policy 605.1 / 8-9 'Protection from Harm' policy does not address this specifically, thus a policy was requested to meet this standard. At the end of the 45-day Interim Phase, the required corrections were still in progress. As requested, Policy 512.1 / 9-7 'Detainee Classification' was uploaded during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>Policy 607.7 / 11-8 'PREA Investigation-Evidentiary Standards' and 606.7 'Sexual Abuse and Sexual Harassment Investigations' were reviewed. An Investigation was uploaded and reviewed as were interviews with the Sheriff. Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager, and Investigator were used to determine compliance with this standard.</p> <p>The Olmsted County Adult Detention Center staff is not responsible for conducting investigations, or evidence collection in the event of a sexual abuse incident. Therefore, this standard is considered not applicable for this facility. If it appears there has been an incident of sexual abuse, the Sheriff's Office detective division will be notified, and they will do all the evidence collection as well as the investigation. As a result of the fact that the detectives and the detention staff are all employed by the Sheriff, no memorandum of understanding is necessary. In the event that the alleged abuser is an employee, the evidence would still be collected by the detectives, but the investigation would be handled by another jurisdiction. The jurisdiction that would handle the investigation is dependent on which jurisdiction has the time to conduct the investigation.</p> <p>Two incidents regarding possible sexual assault between two cell mates were investigated by a Detective from the Olmsted County Sheriff's Department on August 9, 2021, and August 10, 2021. One of them involved a detainee kissing another detainee on the cheek and the other involved a detainee that may have been forced to perform oral sex on the other detainee. Both incidents were claims made by the same two cell mates, but one of the detainees did not want to cooperate with the investigator and the one who was allegedly kissed by the other cell mate did not want to pursue anything further. As a result, both cases were closed.</p> <p>Investigations are conducted promptly, thoroughly, and objectively for all allegations, including third party reports. Where sexual abuse is alleged, the agency will use investigators who have received special training in sexual abuse investigations pursuant to 115.34. Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; will interview alleged victims, suspected perpetrators, and witnesses; and will review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency will conduct compelled interviews only after consulting with the County Attorney's Office as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person's status as a detainee or staff. The agency will not require a detainee who alleges sexual abuse to submit to a polygraph examination or other truth telling device as a condition for proceeding with the investigation of such an allegation.</p>
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	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 607.7 / 11-8 'PREA Investigation-Evidentiary Standards' and 606.7 'Sexual Abuse and Sexual Harassment Investigations' were reviewed. An Investigation was uploaded and reviewed as were interviews with the Sheriff. Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager, and Investigator were used to determine compliance with this standard. The agency policy imposes no standard greater than a preponderance of the evidence in determining the outcome of an investigation.</p> <p>Two incidents regarding possible sexual assault between two cell mates were investigated by a Detective from the Olmsted County Sheriff's Department on August 9, 2021, and August 10, 2021. One of them involved a detainee kissing another detainee on the cheek and the other involved a detainee that may have been forced to perform oral sex on the other detainee. Both incidents were claims made by the same two cell mates, but one of the detainees did not want to cooperate with the investigator and the one who was allegedly kissed by the other cell mate did not want to pursue anything further. As a result, both cases were closed.</p> <p>Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse and will 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. Criminal investigations are done by the Olmsted County Sheriff's Office Investigations Division and 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. Substantiated allegations of conduct that appears to be criminal will be referred for prosecution. The investigation may be referred to an outside agency if staff are alleged to be involved. The agency retains all written reports for as long as the alleged abuser is incarcerated or employed by the agency, plus seven years. The departure of the alleged abuser or victim from the employment or control of the facility will not provide a basis for terminating an investigation.</p> <p>Due to the aforementioned factors, this standard was considered to be compliant.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policies 606.8 / 11-9 'PREA Reporting to Detainees' and 606.7.2 'Reporting to Inmates' were reviewed in determining compliance with this standard as were interviews with the Chief Deputy/PREA Coordinator and Captain/PREA Compliance Manager.</p>

	<p>Following an investigation into a detainee's allegation that he or she suffered sexual abuse in one of the facilities, the agency informs the detainee as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Following a detainee's allegation that a staff member has committed sexual abuse against the detainee, the agency will subsequently inform the detainee (unless the agency has determined the allegation to be unfounded) whenever;</p> <ol style="list-style-type: none"> <li>1. The staff member is no longer assigned to the detainee's unit;</li> <li>2. The staff member is no longer employed at the facility;</li> <li>3. The agency learns from the prosecuting authority that the staff member has been indicted on a charge related to sexual abuse within the facility.</li> </ol> <p>Following a detainee's allegation that he or she had been sexually abused by another detainee, the agency will subsequently inform the alleged victim whenever the prosecuting authority has notified the agency that:</p> <ol style="list-style-type: none"> <li>1. The alleged abuser has been indicted on a charge related to sexual abuse within the facility or</li> <li>2. The alleged abuser has been convicted on a charge related to sexual abuse within the facility.</li> </ol> <p>All such notification or attempted notifications will be documented. An agency's obligation to report under this standard terminates if the detainee is released from the agency's custody.</p> <p>Corrective action included uploading the policy that addresses 115.73 (f) An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody. Policy 606.8 / 11-9 'PREA Reporting to Detainees', which was uploaded as requested and therefore the standard was determined to be compliant.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.8 'Sexual Abuse and Sexual Harassment Between Staff and Inmates' and 606.9 / 11-10 'PREA Staff Discipline' were reviewed. Interviews with the Sheriff, Chief Deputy/PREA Coordinator, and Captain/PREA Compliance Manager were conducted in an effort to determine compliance with the standard.</p> <p>Staff members are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse.</p> <p>Disciplinary sanctions for violations of policies other than actually engaging in sexual</p>

	<p>abuse are commensurate with the nature and circumstances of the acts committed, the staff members' history, and the sanctions imposed for comparable offenses by other staff with similar histories. All terminations for violations of sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.</p> <p>Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with detainees and are reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility takes appropriate remedial measures, and considers whether to prohibit further contact with detainees, in the case of any other violation of agency policies by a contractor or volunteer.</p>
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115.77	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 606.9 / 11-10 'PREA Staff Discipline' and 606.8.1 'Sexual Abuse by Contractor or Volunteer' were reviewed. In addition, interviews with the Chief Deputy/PREA Coordinator and Captain/PREA Compliance Manager were conducted and collectively the information reviewed was used to determine compliance with this standard.</p> <p>Any contractor or volunteer who engages in sexual abuse will be prohibited from contact with detainees is reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility takes appropriate remedial measures, and considers whether to prohibit further contact with detainees, in the case of any other violation of agency policies by a contractor or volunteer.</p>

115.78	Disciplinary sanctions for inmates
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 600.5 / 11-17 'PREA Detainee Discipline', 600.11 'Guidelines for Disciplinary Sanctions', 600.10 'Limitations on Disciplinary Actions', and 600.1 / 8-1 'Rules of Conduct' were all reviewed. In addition, interviews and discussions with the Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager and the medical and mental health staff were all considered in the determination of compliance with this</p>

	<p>standard.</p> <p>Detainees are subject to disciplinary sanctions pursuant to chapter 8 disciplinary policies for interfering with facility operations following an administrative finding that the detainee engaged in detainee-on-detainee sexual abuse or following a criminal finding of guilt for detainee-on-detainee sexual abuse. Sanctions are commensurate with the nature and circumstances of the abuse committed, the detainee's disciplinary history, and the sanctions imposed for comparable offenses by other detainees with similar histories. The disciplinary process considers whether the detainee's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanctions, if any, should be imposed. Therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse are considered as well as whether to require the offending detainee to participate in such interventions as a condition of access to programming or other benefits.</p> <p>The agency can discipline a detainee for sexual contact with a staff member only upon a finding that the staff member did not consent to such contact. For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. All sexual activity involving more than one person is prohibited.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 606.10 / 11-11 'PREA Medical and Mental Health' and 708.3.1 'Prison Rape Elimination Act (PREA) Screening' were reviewed and interviews with medical and mental health staff confirmed findings. Medical and mental health staff were interviewed during this process for the purpose of determining compliance with this standard.</p> <p>Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, jobs, education, and program assignments. Medical and mental health practitioners will obtain informed consent for detainees before reporting information about prior sexual victimization that did not occur in an institutional setting.</p> <p>If the screening pursuant to 115.41 indicates that a detainee has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, medical staff will ensure that the detainee is offered a follow up meeting</p>



	<p>with a medical or mental health practitioner within 14 days of the intake screening; however, there was no evidence that this was being done.</p> <p>The policies uploaded during the Pre-Audit Report Phase of the auditing process did not address standard subsections 115.81-(a)-4 and (c), 115.81 (d), and 115.81 (e)-1. Administration was asked to provide policy to support the aforementioned areas and to provide documentation to support completion of follow-ups of 115.81 (c). In addition, corrective action needed to address 115.81 (e)-1 which requires medical and mental health practitioners to obtain informed consent from detainees before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the detainee is under the age of 18. Administration was also asked to upload relevant policy and training points on a sheet or PowerPoint slide on this and have Medical/ Mental Health staff sign off that they received and understand this training as verification for each medical/mental health staff.</p> <p>At the end of the 45-day Interim Phase, although training was provided for the medical and mental health staff with the required verifications uploaded, many of the required corrections were still in progress. As a result, the requested documentation was uploaded and reviewed during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard. A memo dated 10-14-22 indicated that the two full-time RN's that had worked at the facility had resigned and that any medical staff hired thereafter would be required to complete the aforementioned training.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Policy 606.10 / 11-11 'PREA Medical and Mental Health', 1003.2 'Counseling Policy', and 606.6 'First Responders' were reviewed and interviews with Medical and Mental Health staff and security staff first responders were all used in determining compliance with this standard.</p> <p>Detainee 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. Victims are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards or case, where medically appropriate.</p> <p>Corrective action involved Administration uploading policy to address 115.82 (a), (b), (c), and (c)-1 as nothing was provided initially to support this previously. At the end of the 45-day Interim Phase, the required corrections were still in progress. As a result, these policy updates were addressed and uploaded during the 180-day Corrective</p>



	Action Phase of the process in order to achieve compliance with this standard.
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<b>115.83</b>	<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>Policy 606.10 / 11-11 'PREA Medical and Mental Health' and 1003.2 'Counseling Policy' were reviewed and interviews with medical and mental health staff confirmed findings, resulting in the determination of compliance with this standard.</p> <p>The agency offers medical and mental health evaluation and, as appropriate, treatment to all detainees who have been victimized by sexual abuse. The evaluation and treatment of victims includes, as appropriate, follow up services, treatment plans, and when necessary, referrals for continued care following their transfer to other facilities, or their release from custody. Victims are provided medical and mental health services consistent with the community level of care. Detainee victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from this conduct, the agency provides the victim with timely and comprehensive information about and timely access to all lawful pregnancy related services. Victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. 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.</p>

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.10 'Sexual Abuse Incident Review', 606.11 / 11-12 'PREA Sexual Abuse Incident Review', and the 'PREA Sexual Abuse Incident Review' form were reviewed. A completed and substantiated Sexual Abuse Incident Review form dated October 22, 2019, was provided as evidence and interviews with the Chief Deputy/PREA Coordinator, Captain/PREA Compliance Manager, and a member of the Incident Review Team were conducted in determining compliance with this standard.</p> <p>The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including when the allegation has not been substantiated, unless the allegation is unfounded. This review will occur within 30 days of the conclusion of the investigation. The review team will include the Chief Deputy, PREA Coordinator,</p>

	<p>and PREA Compliance Managers with input from line supervisors, investigators, and medical and or mental health practitioners.</p> <p>The review team:</p> <ul style="list-style-type: none"> <li>• Considers whether the allegations or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse.</li> <li>• Considers 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, was motivated or otherwise caused by group dynamics at the facility.</li> <li>• Examines the area in the facility where the incident allegedly occurred to access whether physical barriers in the area may enable abuse.</li> <li>• Assesses the adequacy of staffing levels during different shifts.</li> <li>• Assesses whether monitoring technology should be deployed or augmented to supplement supervision by staff; and</li> <li>• Prepares a report of its findings, including but not limited to determinations made pursuant to the above points, and any recommendations for improvement, and submit the report to the Sheriff and the PREA Compliance Manager.</li> <li>• The facility implements the recommendations for improvement or documents its reasons for not doing so.</li> </ul> <p>The facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>Administration was asked to upload the review or Narrative Report of the incident that occurred 10-22-19. At the end of the 45-day Interim Phase, the requested documentation had yet to be received. As a result, the report was uploaded during the 180-day Corrective Action Phase of the process in order to achieve compliance with this standard.</p>
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<b>115.87</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 606.3 'PREA Coordinator', 606.14 / 11-18 'PREA Data Collection, Review and Storage', and the 'PREA Data Collection Forms' from 2016 to 2021 were reviewed. In addition, interviews conducted with the Sheriff, Chief Deputy/PREA Coordinator, and Captain/PREA Compliance Manager were all used to determine compliance with this standard.</p> <p>The agency collects accurate, uniform data for every allegation of sexual abuse at all facilities using a standardized instrument and set of definitions and aggregate the incident-based sexual abuse data at least annually at the end of the calendar year.</p>

	<p>The data includes at a minimum the data necessary to answer all the questions for the most recent version of the Survey of Sexual Violence. The agency maintains, reviews and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Upon request, the agency will provide all such data from the previous calendar year to the Department of Justice no later than June 30th.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Policy 606.14 / 11-18 'PREA Data Collection, Review and Storage' and the agency website: <a href="https://www.olmstedcounty.gov/government/county-departments/sheriffs-office/adult-detention-center-adc/about-adult-detention-center-adc#audits-andinspections3">https://www.olmstedcounty.gov/government/county-departments/sheriffs-office/adult-detention-center-adc/about-adult-detention-center-adc#audits-andinspections3</a> were reviewed. Interviews with the Olmsted County Sheriff and Chief Deputy/PREA Coordinator were also conducted.</p> <p>The agency reviews data collected and aggregated pursuant to 115.87 and 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices and training, including by:</p> <ol style="list-style-type: none"> <li>1. Identifying problem areas;</li> <li>2. Taking corrective action on an on-going basis; and</li> <li>3. Preparing an annual report of its findings and corrective actions for each facility as well as the agency as a whole.</li> </ol> <p>The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse; however, the data from prior years is not included on the website as required.</p> <p>The report is approved by the Sheriff and made readily available to the public through the website provided above.</p> <p>Specific material is redacted from the report when publication would present a clear and specific threat to the safety and security of the facility but must indicate the nature of the material redacted.</p> <p>At the end of the 45-day Interim Phase, the required corrections were still in progress. Specifically, Administration was asked to upload the annual data to the website dating back to 2016 and in a spreadsheet such that previous years could be compared. Administration developed and uploaded a spreadsheet at the request of this auditor and the data from 2016 to 2021 was provided in a more efficient manner and was posted on their agency's website. This issue was addressed during the</p>

	Corrective Action Phase of the process, and as a result, it was determined that the facility achieved compliance with this standard.
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 606.14/11-18 'PREA Data Collection, Review and Storage' and the 2021 Sexual Abuse Annual Report via the PREA Data Collection Forms were reviewed. Interviews with the Sheriff and Chief Deputy/PREA Coordinator were conducted with all the aforementioned factors used to determine compliance with this standard.</p> <p>The PREA Coordinator ensures that data collected pursuant to 115.87 are securely retained. The agency makes all aggregated sexual abuse data, from all facilities under its control and all facilities with which it contracts, readily available to the public at least annually through the website. Before making the data available, all personal identifiers will be removed. Sexual abuse data collected pursuant to 115.87 and 115.287 will be retained for at least 10 years after the date of the initial collection.</p> <p>Corrective action involved providing details as to how the data is protected and secured. According to an uploaded memo dated September 22, 2022, "PREA data is compiled and stored on an internal server with security access granted only to the Compliance Managers, PREA Coordinator, and Administrative Assistant. Access is granted by login credentials."</p> <p>The following agency website was also reviewed in consideration of this standard: <a href="https://www.olmstedcounty.gov/government/county-departments/sheriffs-office/adult-detention-center-adc/about-adult-detention-center-adc#audits-andinspections3">https://www.olmstedcounty.gov/government/county-departments/sheriffs-office/adult-detention-center-adc/about-adult-detention-center-adc#audits-andinspections3</a></p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Olmsted County Adult Detention Center currently is one of two facilities in Olmsted County that requires PREA compliance: Olmsted County Work Release Facility is the other. The Adult Detention Center was audited initially in 2016 and again in 2019, with both times Olmsted County ADC determined to be compliant with the PREA</p>

	<p>standards. During the on-site visit, this auditor had access to, and the ability to observe, all areas of the facility. The auditor received copies of all requested documentation. All resident and staff interviews were conducted in private rooms. No correspondence was received by the auditor prior to the on-site audit or within the interim prior to completing this report.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Olmsted County Adult Detention Center has published on its website the prior PREA Audit Report completed on October 5, 2019, and they have been instructed to post the Final PREA Report within ninety days of issuance by this auditor.

**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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**115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Has the agency employed or designated an agency-wide PREA Coordinator?	yes
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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**115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
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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
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**115.12 (a) Contracting with other entities for the confinement of inmates**

If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
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**115.12 (b) Contracting with other entities for the confinement of inmates**

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na
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	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<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.)	yes
<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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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



<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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).)	yes
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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).)	no
	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).)	yes
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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).)	yes
	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).)	yes
	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).)	yes
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<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
<b>115.15 (f)</b>	<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)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication	yes

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<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	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b) Hiring and promotion decisions</b>		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c) Hiring and promotion decisions</b>		
	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
<b>115.17 (d) Hiring and promotion decisions</b>		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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.)	yes
<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
<b>115.21 (a)</b>	<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
<b>115.21 (b)</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.)	na
	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.)	na
<b>115.21 (c)</b>	<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)?	no

	Has the agency documented its efforts to provide SAFEs or SANEs?	no
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na
<b>115.22 (a)</b>	<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
<b>115.22 (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
<b>115.22 (c) Policies to ensure referrals of allegations for investigations</b>		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a) 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
<b>115.31 (b)</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
<b>115.31 (c)</b>	<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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<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 receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (b)</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	yes

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

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
<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 or the agency does not employ medical staff.)	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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<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? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
<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
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

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

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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	yes



	information is not exploited to the inmate's detriment by staff or other inmates?	
<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
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

	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
<b>115.43 (d) Protective Custody</b>		
	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) 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) 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) 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	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.53 (a)</b>	<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,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</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
<b>115.53 (c)</b>	<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
<b>115.54 (a)</b>	<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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes



	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
<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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	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	yes

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

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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<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
<b>115.77 (a)</b>	<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
<b>115.77 (b)</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
<b>115.78 (a)</b>	<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
<b>115.78 (b)</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
<b>115.78 (c)</b>	<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	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
<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? (N/A if the facility is not a jail).	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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<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
<b>115.82 (b)</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
<b>115.82 (c)</b>	<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
<b>115.82 (d)</b>	<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
<b>115.83 (a)</b>	<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
<b>115.83 (b)</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</b>	

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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<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
<b>115.87 (b)</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	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<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?	no
<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.)	yes
	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.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no
<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</b>	<b>Audit contents and findings</b>	



(f)	
	<div data-bbox="320 185 1273 555"> <p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>