

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Interim Report December 6, 2019
Date of Final Report March 12, 2020

Auditor Information

Name: Bryan K Henson	Email: bshenson@windstream.net
Company Name: B Henson Consulting Inc	
Mailing Address: 260 Torrey Pines Drive	City, State, Zip: Ledbetter, Ky 42058
Telephone: 270 994-1825	Date of Facility Visit: November 12-13, 2019

Agency Information

Name of Agency:		Governing Authority or Parent Agency (If Applicable):	
Daviess County Detention Center		Same	
Physical Address: 3337 Hwy 144		City, State, Zip: Owensboro, KY 42303	
Mailing Address: Same		City, State, Zip: Click or tap here to enter text.	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: http://daviesscojail.org/Sexual_Abuse_PREA_Information.html			

Agency Chief Executive Officer

Name: Art Maglinger	
Email: amaglinger@daviesscojail.org	Telephone: 270 685-8466 ext 205

Agency-Wide PREA Coordinator

Name: Joni Clark	
Email: majorjoniclark@gmail.com	Telephone: 270 316-9334
PREA Coordinator Reports to: Jailer	Number of Compliance Managers who report to the PREA Coordinator 0

Facility Information

Name of Facility: Daviess County Detention Center

Physical Address: 3337 Hwy 144

City, State, Zip: Owensboro, Ky 42303

Mailing Address (if different from above):
Same

City, State, Zip: Click or tap here to enter text.

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: http://daviesscojail.org/Sexual_Abuse_PREA_Information.html

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: Click or tap here to enter text.)

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
Click or tap here to enter text.

Warden/Jail Administrator/Sheriff/Director

Name: Art Maglinger

Email: amaglinger@daviesscojail.org

Telephone: 270 685-8466 ext 205

Facility PREA Compliance Manager

Name: N/A

Email: Click or tap here to enter text.

Telephone: Click or tap here to enter text.

Facility Health Service Administrator N/A

Name: Angie Funk

Email: 7398@shpjailmedical.com

Telephone: 270 685-8466 ext 218

Facility Characteristics

Designated Facility Capacity:	699	
Current Population of Facility:	762	
Average daily population for the past 12 months:	749	
Has the facility been over capacity at any point in the past 12 months?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	18 and over	
Average length of stay or time under supervision:	36 days	
Facility security levels/inmate custody levels:	Min - Max	
Number of inmates admitted to facility during the past 12 months:	7079	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	Unknown	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	Unknown	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
<p>Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):</p>	<input type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input checked="" type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	86	

Number of staff hired by the facility during the past 12 months who may have contact with inmates:	30
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	3
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	Med-9; Food-6; Comm-3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	258
Physical Plant	
<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	4
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	125
Number of single cell housing units:	14
Number of multiple occupancy cell housing units:	111
Number of open bay/dorm housing units:	28
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	28
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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Medical and Mental Health Services and Forensic Medical Exams

Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Where are sexual assault forensic medical exams provided? Select all that apply.	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)

Investigations

Criminal Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:	0
When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)	<input type="checkbox"/> Local police department <input checked="" type="checkbox"/> Local sheriff's department <input checked="" type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A

Administrative Investigations

Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?	6
When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A

Audit Findings

Audit Narrative

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

The Prison Rape Elimination Act (PREA) on-site audit of the Daviess County Detention Center (DCDC), of Owensboro, KY was conducted on November 12-13, 2019 by Bryan K. Henson, a U.S. Department of Justice Certified PREA Auditor for adult facilities, and one support staff, Sheri Henson, a non-certified member of the audit team. During the on-site review, it was found that audit notices were posted throughout the facility. As of the date of this report, the Auditor had received one letter of correspondence or mail that was reviewed and forwarded to the facility to be investigated. While on site, the auditor reviewed the investigative report resulting from the correspondence received. The Point of Contact established at DCDC completed the *Pre-Audit Questionnaire* and it was provided to the Auditor along with supporting documents contained on a flash drive approximately 3 weeks prior to the on-site portion of the audit. Pre-audit preparation by the Auditor included a thorough review of all documentation and materials submitted by the facility along with the data included in the completed *Pre-Audit Questionnaire*. The documentation reviewed included agency policies, procedures, forms, education materials, training curriculum, organizational charts, and other PREA related materials that were provided to demonstrate compliance with the PREA standards. This review prompted a series of questions and request for additional supporting documentation submitted in writing to the POC/ PREA Coordinator. Answers to the questions were submitted back with some additional supporting documentation.

The Auditor team conducted an in-briefing with Jailer Maglinger, PREA Coordinator (PC) Joni Clark, and Captain Joseph Moore to discuss the audit schedule and an overview of the audit process. The Audit team toured the facility with Captain Moore and PC Clark. All areas of the facility were toured to include housing, day room and bathroom areas, intake, administrative, program, phone and recreational areas. The audit team spoke informally with the staff and the inmates during the tour. The audit team made note of cross gender announcements, interaction between staff and inmates, the placement of over 120 cameras at the facility and noted no blind areas. On day one of the on-site review, once the tour was completed, the Audit team began to conduct interviews of staff and conduct file reviews. The interviews were conducted in areas that allowed for confidentiality, yet staff could ensure a secure area. The audit team spent time on the 3-11 shift to interview evening shift staff. On day two, the audit team continued to conduct interviews by coming in early on the 11-7 shift to interview the night shift staff and then began to conduct inmate interviews, and conduct additional file reviews for both staff, inmate, and investigative files.

The inmate population count on the first day of the on-site review was 762. The audit team interviewed a total of 41 inmates, to include 9 targeted interviews (3 Who Reported a Sexual Abuse, 3 LBGTI, 2 LEPs, 1 Who Disclosed Sexual Victimization During Risk Screening) and 32 random interviews. In addition, the audit team interviewed 29 staff, including 16 specialized staff, 13 random staff (representing all shifts and various posts), the Agency Head (Jailer), and the PREA coordinator. The

auditor also made contact with New Beginnings to discuss the interventions and support provided as Victim Advocates, as well as the Owensboro Health Regional Hospital to ensure the availability of SANE services in order to conduct forensic examinations.

In the past 12 months, the Jail reported there were 30 allegations reported of sexual abuse or sexual harassment at the facility with 5 Substantiated, 14 Unsubstantiated, 8 Unfounded, and 3 cases open.

Facility Characteristics

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

The Daviess County Detention Center is a full-service correctional facility offering all available alternatives to incarceration to include Pretrial Services, Home Detention and Work Release, as well as traditional incarcerations and imprisonment for offenders either awaiting trial or sentenced to the Daviess County Detention Center. The designed facility capacity is 699 with an average daily population over the past 12 months of 749. The jail houses male and female inmates from county, state and federal jurisdictions. The facility housing units are made up of dormitory, multi-cell, and single cell units. The facility has 86 full time security and administrative staff with 30 contracted staff that provide medical, mental health, food, and canteen services. The facility has over 120 cameras to assist staff in providing security and safety of the inmate population.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Standards Exceeded

Number of Standards Exceeded: 0

List of Standards Exceeded: Click or tap here to enter text.

Standards Met

Number of Standards Met: 43

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: Click or tap here to enter text.

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- 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 No

115.11 (c)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Organizational Chart
2. Interviews
 - a. PREA Coordinator (PC)

§115.11 (a): Daviess County Detention Center (DCDC) provided a written facility PREA manual that mandates a zero-tolerance policy regarding all forms of sexual abuse/harassment. A review of the facility PREA Manual reflected that it does outline the facilities approach to prevent, detect, and respond to sexual abuse and sexual harassment.

§115.11 (b): DCDC does employ a PREA Coordinator (PC). The Organizational Chart confirms that the PC is upper-level as the position answers directly to the Jailer. Interviews of the PC support the PC has sufficient time and authority to develop, implement, and oversee the facility efforts to comply with the PREA standards.

§115.11 (c): DCDC does not have a PREA compliance manager since they only operate one facility, therefore this provision is not applicable.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

DCDC does not contract for the confinement of its inmates with any other entity; therefore, finding this standard as non-applicable and therefore compliant.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No

- 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 No
- 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 No NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No
- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (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 No NA

115.13 (c)

- 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 No
- 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 No
- 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 No

115.13 (d)

- 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 No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Logs documenting rounds
2. Interviews
 - a. Jailer
 - b. Intermediate or Higher-level facility staff

§115.13 (a)(b): DCDC PREA manual indicates a staffing plan is developed for the agency that provides for adequate levels of staff and necessary video monitoring to help protect inmates against sexual abuse. It indicated deviations from staffing plan shall be documented and justified. The manual also indicates consideration is given to the required components of section (a) when calculating adequate staffing levels. Interviews of the Jailer confirmed such consideration is given. Documentation was reviewed of staffing plan that included each building and posts assigned to each building, along with the expectations for each post described. Samples of shift assignments for each shift were provided to document staffing plan is followed as well no deviations noted. The auditor observed staff on each shift and that adequate staffing was demonstrated. A review of the video cameras was completed noting over 120 cameras throughout the facility with no evident blind spots.

§115.13 (c): DCDC PREA manual states whenever necessary, but no less frequently than once each year, in consultation with PREA Coordinator, DCDC shall assess, determine and document whether adjustments are needed to:

1. Staffing plan established pursuant to paragraph (a) of this section
2. Deployment of video monitoring systems and other monitoring technologies
3. Resources available to commit to ensure adherence to staffing plan

Documentation of annual reviews were provided and reviewed, finding appropriate documentation of required adjustments were included.

§115.13 (d): DCDC PREA manual states supervisors of intermediate-level or higher-level shall conduct and document unannounced rounds to identify and deter staff sexual abuse/harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Staff shall be prohibited from alerting other staff that these supervisory rounds are occurring, unless such announcement is related to legitimate operational functions of facility. Although documentation of such rounds was provided on both day and night shifts, the documentation was not specific to indicate such rounds were

unannounced or for what purpose. However, interviews of intermediate or higher-level supervisors supported that the rounds were made in a manner to support unannounced, such as making rounds at irregular intervals and using different routes to complete such rounds. Those interviewed had knowledge of what reasons such rounds were made. ***The auditor recommends the facility search for methods to provide more detail to the unannounced PREA rounds in their logs.***

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- 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 No NA

115.14 (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].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- 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 No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

DCDC does not house anyone under the age of 18; therefore, finding this standard as non-applicable and therefore compliant.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- 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 No

115.15 (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 No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

- 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 No
- 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 No

- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

- 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 No
- 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 No

115.15 (f)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Random Staff
 - b. Random Inmates

§115.15 (a)(b)(c): DCDC PREA manual prohibits all cross-gender strip searches and cross-gender visual body cavity searches, unless exigent circumstances exist or when performed by a medical practitioner. The PREA manual also prohibits cross-gender pat down searches of female inmates unless exigent circumstances exist, and shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. The manual goes on to require documentation of such exigent searches in an incident report using a category code of "Exigent". Interviews of both staff and female inmates support that the PREA manual is followed regarding such searches as noted above. The PAQ indicated no such searches under exigent circumstances were conducted and therefore not required to be documented. There was no documentation reviewed contrary to what was indicated in the PAQ.

§115.15 (d): DCDC PREA manual states inmates shall be enabled to shower, perform bodily functions and change clothing without nonmedical staff of opposite gender viewing their breasts, buttocks or genitalia, except when such viewing is incidental to routine cell checks. It also states that staff/visitors of opposite sex shall verbally announce their presence, by saying "male/female on the floor" any time they enter an inmate housing unit. Cross gender announcements were observed during the on-site review. Interviews of both staff and inmates support the announcements are made.

§115.15 (e): DCDC PREA manual states at no time shall a transgender inmate receive a pat-down or strip search as a form of harassment or to determine the inmate's sex. Interviews of staff support that the PREA manual is followed. The facility reported no transgender/intersex inmates were currently at the facility.

§115.15 (f): DCDC PREA manual directs staff to conduct cross-gender, transgender and intersex pat-down searches in a professional and respectful manner, and in least intrusive manner possible. The training lesson plan was reviewed by the auditor and was found to include all required components contained in the standard. Interviews of staff support they have been trained as required.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- 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 No
- 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 No
- 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 No

- 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 No
- 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 No
- 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 No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- 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 No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- 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 No
- 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 No

115.16 (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 No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Agency Head
 - b. Inmates with disabilities/limited English proficient
 - c. Random Staff

§115.16 (a): DCDC PREA manual states appropriate steps shall be taken to ensure inmates with disabilities, including inmates who are deaf or hard of hearing, blind or have low vision, have intellectual, psychiatric, or speech disabilities, have equal opportunity to participate in or benefit from all aspects of efforts to prevent, detect and respond to sexual abuse/harassment. Such steps include ensuring effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. The Auditor reviewed curriculum used in training staff that described in detail methods used to provide PREA information to those with disabilities. A document was provided that has observational questions requiring the booking deputy to answer yes or no to whether the booking deputy feels the inmate has understanding of the questions asked of them, and whether the inmate has a language, hearing impairment, or literacy issue. Interviews with the Agency Head support that staff are trained to effectively communicate with inmates with disabilities.

§115.16 (b): DCDC PREA manual states reasonable steps shall be taken to ensure meaningful access to all efforts to prevent, detect and respond to sexual abuse/harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. The auditor reviewed the PREA handout that is provided to inmates at intake in Spanish with the ability to translate it to any language requested. The facility provided documentation of a signed service agreement with Voiance Languages Services, LLC. They provide over the phone interpretation for any language needed, and Video Remote Interpretation. The auditor was provided access and utilized the services when interviewing LEP inmates. Interviews with LEP inmates support they were provided information in a manner that they understood. They had knowledge of how to make a report if necessary.

§115.16 (c): DCDC PREA manual states inmate interpreters, inmate readers or other types of inmate assistants are prohibited, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise inmate's safety, performance of first responder duties or investigation of inmate's allegations. Interviews with staff support that the PREA manual is followed. There were no sexual abuse investigations reviewed that indicated an inmate interpreter had been used.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- 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 No
- 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 No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- 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 No
- 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 No
- 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 question immediately above? Yes No

115.17 (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 No
- 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 No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No
- 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 No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- 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 No

115.17 (f)

- 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 No
- 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 No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. PREA Hiring/Promotion Record Check form
 - c. DCDC Application for Employment
 - d. Staff file reviews
2. Interviews
 - a. Human Resources Staff

§115.17 (a): DCDC PREA manual states employees shall not be hired or promoted and contractors shall not be enlisted who may have contact with inmates who:

1. Have engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility or other institution
2. Have been convicted of engaging or attempting to engage in sexual activity in community facilitated by force, overt or implied threats of force, or coercion, or if victim did not consent or was unable to consent or refuse
3. Have been civilly or administratively adjudicated to have engaged in activity described in paragraph (a)(2) of this section

A review of staff files support that the required questions of misconduct are asked of both those applicants, contractors, and those being promoted.

§115.17 (b): DCDC PREA manual states incidents of sexual harassment shall be considered when determining whether to hire or promote anyone or to enlist contractors who may have contact with inmates. Interviews with the Human Resources staff support that incidents of sexual harassment are considered when hiring or promoting, or enlisting services of potential contractors. A review of employee files provided documentation that indicated staff are asked prior to employment and promotions if they have had any sexual harassment incidents supporting that this is considered by the facility.

§115.17 (c)(d)(e): DCDC PREA manual indicates the agency shall perform criminal background records check and make best effort to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigating of such conduct before hiring new employees who may have contact with inmates. The PREA manual also states criminal background records check shall be performed before enlisting services of contractors who may have contact with inmates. Such background checks are required by the PREA manual at least every five years on both employees and contractors. Interviews of the Human Resources staff, as

well as employee file reviews conducted by the audit team support that criminal background checks are conducted for both staff and contractors, and attempts to contact prior institutional employers regarding incidents of substantiated sexual abuse are made before hiring potential employees. The file review also confirm that the agency also conducts such criminal background checks for all employees and contractors at least every five years.

§115.17 (f): DCDC PREA manual states applicants and employees who may have contact with inmates shall be asked directly about previous misconduct described in paragraph (a) of this standard in written applications and written self-evaluations conducted as part of reviews of current employees. Interviews of the Human Resource (HR) staff confirm such questions are asked of all applicants and on the written job applications and on a PREA Hiring/Promotion Record Check form. The HR staff did not indicate the questions were asked for those employees being promoted, but it was later confirmed through file reviews that promotional staff are completing the form noted above. A file review conducted by the audit team supported the responses of the Human Resources staff confirming the questions of misconduct are asked and answered by those being promoted. The HR staff also reported that the facility does not conduct self-evaluations. DCDC PREA manual also mandates that employees have a continuing affirmative duty to disclose any such misconduct. This was also confirmed by the HR interview.

§115.17 (g): DCDC PREA manual states material omissions regarding sexual misconduct or provision of materially false information shall be grounds for termination. The application for employment requires the applicant to sign stating they understand providing false information will be grounds for immediate discharge.

§115.17 (h): DCDC PREA manual states information on substantiated allegations of sexual abuse/harassment involving a former employee shall be provided upon request from an institutional employer for whom such employee has applied to work. HR Interviews support the agency would provide such information upon request.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- 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 No NA

115.18 (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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. None
2. Interviews
 - a. Agency Head
 - b. Jailer

Interviews with the Jailer support that the agency makes every effort to budget for additional cameras annually to continue to eliminate blind spots in order to reduce opportunities for sexual abuse incidents. The agency reported no expansions or modifications were made to existing facility.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- 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 No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No 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.) Yes No NA

115.21 (c)

- 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 No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a)

through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate Handbook
 - c. New Beginnings MOU
 - d. Investigative File reviews
2. Interviews
 - a. Random Staff
 - b. Medical staff
 - c. Inmates who reported sexual abuse

§115.21 (a)(b): DCDC PREA manual states to the extent of responsibility for investigating allegations of sexual abuse, a uniform evidence protocol shall be followed that maximizes potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The facility does not house youth under the age of 18. The facility reports protocol follows Department of Justice guidelines. Interviews of staff support they have a good understanding of the agency's protocol for obtaining usable physical evidence if an inmate alleges sexual abuse to include first responder duties.

§115.21 (c): DCDC PREA manual supports standard by stating victims of sexual abuse shall be offered access to forensic medical examinations, without financial cost, where evidentiary or medically

appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. If SAFEs or SANEs cannot be made available, examination can be performed by other qualified medical practitioners. Efforts to provide SAFEs or SANEs shall be documented. The PAQ, as well as the interviews of the medical staff report that all forensic examinations will be conducted outside the facility at Owensboro Health Regional Hospital. The audit team contacted the hospital and confirmed that SANE services are available for any victim of sexual abuse in order to conduct a forensic examination.

§115.21 (d): DCDC PREA manual states attempts shall be made to make available to victim a victim advocate from a rape crisis center. If rape crisis center is not available to provide victim advocate services, these services shall be made available from qualified staff from a community-based organization. Efforts to secure services from a rape crisis center shall be documented. The auditor reviewed an MOU between DCDC and New Beginnings Sexual Assault Support Services confirming the facility makes victim advocates services available from a Rape Crisis Center. The auditor interviewed 2 inmates that had reported an incident of sexual abuse and one of the two confirmed the facility had provided information to them after they had made the claim. This was also confirmed on the investigative file review. The second inmate interviewed indicated no services were offered. This file was not reviewed due to being an open case. Contact information for New Beginnings is available to all inmates through the Inmate Handbook.

§115.21 (e): DCDC PREA manual states as requested by victim, a victim advocate, qualified staff or qualified community-based staff shall accompany and support victim through forensic medical examination process and investigation interviews and shall provide emotional support, crisis intervention, information and referrals. Interviews of inmates who had reported sexual abuse supported such services are made available.

§115.21 (f): DCDC PREA manual indicates when outside agency is used for investigation, that agency shall be requested to follow the requirements of 115.21 (a) through (e). The auditor reviewed an MOU with Daviess County Sheriff's Office (DCSO) that requires DCSO to follow requirements of 115.21 a-e. Also reviewed correspondence from Kentucky State Police (KSP) that supports KSP investigators follow such requirements.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (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 No

- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- 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 No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Investigative Reports
 - c. Pre-Audit Questionnaire
2. Interviews
 - a. Agency Head
 - b. Investigative Staff

§115.22 (a): DCDC PREA manual states administrative or criminal investigations shall be completed for all allegations of threatened or actual sexual abuse/harassment. Interviews of the Agency Head supported that each of the allegations of sexual abuse/harassment are investigated. He went on to state that a PREA checklist is used once an allegation is made to ensure the investigation is completed.

The audit team reviewed investigations selected from the PREA log that confirmed such investigations are completed.

§115.22 (b)(c): DCDC PREA manual states allegations of sexual abuse and sexual harassment shall be referred for investigation to agency with legal authority to conduct criminal investigations, unless allegation does not involve potentially criminal behavior. Referrals shall be documented. This policy shall be published on website. If separate entity is responsible for conducting criminal investigations, such publication shall describe responsibilities of both DCDC and investigating entity. The PAQ indicates that DCDC refers criminal investigations to both Kentucky State Police (KSP) and Daviess County Sheriff's Office (DCSO). The auditor reviewed the agency website and confirmed the investigative policy is posted and describes the responsibilities of both DCDC and KSP/DCSO. Interviews of investigative staff supported that such criminal allegations are referred to either KSP or DCSO for criminal investigations and document the referrals in the sexual offense allegation reporting form as well as the investigative report.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No
- 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 No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- 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 No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No

- 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 No
- 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 No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- 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 No

115.31 (c)

- Have all current employees who may have contact with inmates received such training? Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. PREA Training Curriculum
 - c. Training File review
2. Interviews
 - a. Random Staff

§115.31 (a): DCDC PREA manual mandates training in the required areas for all staff that may have contact with inmates. The lesson plan was reviewed and contained all components required in this section of the standard. Responses to interview questions asked of staff regarding their PREA training supported they have received training on required topics.

§115.31 (b): DCDC PREA manual states training shall be tailored to the gender of inmates at the facility. DCDC houses both genders.

§115.31 (c): DCDC PREA manual states each employee shall be provided refresher training every two years to ensure that staff know agency's current sexual abuse/harassment policies and procedures. In years in which staff does not receive refresher training, refresher training information on current sexual abuse/harassment policies shall be provided. A review of staff training files supported that annual refresher training is conducted at DCDC.

§115.31 (d): DCDC PREA manual states employees shall document through signature that they understand the training they have received. A review of training files reflected documentation of staff signing acknowledging they received and understood the required PREA training.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- 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 No

115.32 (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 No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Training Curriculum
 - c. Training file review
2. Interviews
 - a. Volunteers

§115.32 (a)(b)(c): DCDC PREA manual states visitors who have contact with inmates shall be trained on sexual abuse/harassment prevention, detection and response policies and procedures. The level and type of training provided to visitors shall be based on the services they provide and level of contact they have with inmates. Visitors who have contact with inmates shall receive information explaining the zero-tolerance policy regarding sexual abuse/harassment and how to report such incidents or suspicions. Documentation shall be maintained confirming that visitors understand the training they received. Contractors and Volunteers are trained with the same PREA training lesson plan. Interviews of contractors and volunteers, as well as a review of training files supports that contractors and volunteers do receive training as required by the PREA manual and PREA standards. The file review reflected documentation confirming they understood the training they received.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (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 No
- 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 No
- 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 No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)? Yes No
- 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 No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate Handbook
2. Interviews
 - a. Intake Staff
 - b. Random Inmates

§115.33 (a): DCDC PREA manual states during intake process, inmates shall receive information explaining the zero-tolerance policy and how to report incidents or suspicions, knowledge or information of sexual abuse/harassment. Inmate file reviews reflected documentation where inmates are provided information as required above in the PREA manual. Interviews of Intake staff support that inmates do receive such information and that booking staff read this information to inmates during the intake process. Interviews of inmates also supported they do receive information about the facilities rules against sexual abuse and sexual harassment when they first arrive.

§115.33 (b)(c): DCDC PREA manual states within 30 days of intake, inmates shall receive comprehensive education regarding their rights to:

1. Be free from sexual abuse/harassment
2. Be free from retaliation for reporting such incidents
3. Be aware of policies and procedures for responding to such incidents

DCDC is a single facility agency; therefore, all inmates upon intake are provided education. Inmate file review reflected that inmates answer questions that cover each component of comprehensive education and is verified by the inmate's signature. Interviews of the intake staff indicated that the required PREA information for comprehensive education is read to them and the inmate sign a form after answering such information, and the intake staff indicate the information is available on the kiosk. The PREA video (PREA: What you need to know) is shown facility wide on the kiosk each Monday at 1pm. The Inmate handbook contains all required PREA information for comprehensive education and inmates are required to review the handbook and provide verification prior to getting access to any additional kiosk features.

§115.33 (d): DCDC PREA manual states inmate education shall be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired or otherwise disabled, as well as to inmates who have limited reading skills. As described in 115.16, the Auditor

reviewed curriculum used in training staff that described in detail methods used to provide PREA information to those with disabilities. A document was provided that has observational questions requiring the booking deputy to answer yes or no to whether the booking deputy feels the inmate has understanding of the questions asked of them, and whether the inmate has a language, hearing impairment, or literacy issue. Also, the facility has a signed service agreement with Voiance Languages Services, LLC. They provide over the phone interpretation for any language needed, and Video Remote Interpretation.

§115.33 (e)(f): DCDC PREA manual states inmate participation shall be documented for these education sessions. Inmate file reviews reflected such documentation is maintained by the facility. In addition to providing such education, key information shall be continuously and readily available or visible to inmates through posters, inmate handbooks or other written formats. Signage containing required PREA information was observed posted at the entrance of each housing area.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- 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 No NA

115.34 (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 No NA
- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
- 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 No NA
- 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 No NA

115.34 (c)

- 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 No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. PREA Investigation Curriculum
 - c. Training file review
2. Interviews
 - a. Investigative Staff

§115.34 (a)(b)(c): DCDC PREA manual states DCDC investigators shall receive training in conducting sexual abuse investigations in confinement settings in addition to general training. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and criteria and evidence required to substantiate a case for administrative action or prosecution referral. Documentation shall be maintained indicating that investigators have completed required specialized training in conducting sexual abuse investigations. The Auditor reviewed a training agenda that supports the required training components were included in the specialized training provided for PREA investigators. The auditor also reviewed documentation that confirmed that DCDC investigators completed required specialized training. Interviews of investigative staff support they have received the required specialized training.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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 No NA
- 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 No NA
- 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 No NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) Yes No NA

115.35 (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.) Yes No NA

115.35 (c)

- 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 No NA

115.35 (d)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Training Files
2. Interviews
 - a. Medical and Mental Health Staff

§115.35 (a)(c)(d): DCDC PREA manual states full- and part-time medical/mental health practitioners who work regularly in facility shall receive training on:

1. How to detect and assess signs of sexual abuse/harassment
2. How to preserve physical evidence of sexual abuse
3. How to respond effectively and professionally to victims of sexual abuse/harassment
4. How and to whom to report allegations of sexual abuse/harassment

DCDC PREA manual also indicates documentation shall be maintained indicating that medical/mental health practitioners have received training referenced in this standard either from DCDC or elsewhere. Medical/mental health practitioners shall also receive training mandated for contractors.

Interviews of medical and mental health staff supports that they had received the required specialized training. A review of training files reflected documentation indicating completion of all required PREA training.

§115.35 (b): DCDC medical staff do not conduct forensic examinations; therefore, this section is not applicable.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- 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 No
- 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 No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No

- 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 No
- 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 No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- 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 No
- 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 No
- 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 No

115.41 (f)

- 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 No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? Yes No
- 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 No

115.41 (h)

- 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 No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Risk Screening Form
 - c. Inmates file review (Assessments and Reassessments)
2. Interviews
 - a. Risk Screening Staff
 - b. Random Inmates
 - c. PREA Coordinator

§115.41 (a)(b): DCDC PREA manual states inmates shall be assessed during intake screening and upon transfer from another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. DCDC PREA manual states intake screening shall ordinarily take place within 72 hours of arrival. Interviews of staff that perform risk screening support that they do conduct such assessments during the intake or booking process. Interviews of inmates confirm they are asked questions at intake/booking related to risk screening for both victimization and abusiveness, and this normally occurs the same day they arrive.

§115.41 (c): DCDC PREA manual indicates risk assessments shall be conducted using an objective screening instrument. A review of the screening questions indicates a yes/no format and if the inmates responds "yes" to a specific number of the questions in each of the sections for victimization and abusiveness, then the inmate is determined to be high risk for that respected section. This confirms the screening tool to be objective.

§115.41 (d): DCDC PREA manual indicates the screening for risk of victimization considers each of the required criteria except for whether the inmate is detained solely for civil immigration purposes. During the on-site review, the audit team reviewed the tool used to screen for risk of victimization and the review indicated that it contained all required components except #6 "Whether the inmate has prior convictions for sex offenses against an adult or child", and #10 Whether the inmate is detained solely

for civil immigration purposes. It was determined that #10 was not added to the tool due to DCDC does not house any inmates solely for civil immigration purposes; therefore, not necessary to have on the tool. Through a Corrective Action Plan (CAP), the facility revised the screening tool to include #6 "Whether the inmate has prior convictions for sex offenses against an adult or child". The revised tool was reviewed by the auditor and contained all necessary components to satisfy this section of the standard. The CAP included a review of a series of completed screenings with the revised tool. Based upon the review of these completed screenings, this section of the standard is now found to be compliant.

§115.41 (e): DCDC PREA manual indicates the screening for risk of being sexually abusive considers each of the required criteria. A review of the tool used for risk of being sexually abusive found that it contained all components required by the standard.

§115.41 (f)(g): DCDC PREA manual states within set period, not to exceed 30 days from inmate's arrival at DCDC, inmate's risk of victimization or abusiveness shall be reassessed based upon any additional or relevant information received since intake screening. Inmate's risk levels shall be reassessed when warranted due to referral, request, incident or sexual abuse or receipt of additional information that bears on inmate's risk of sexual victimization or abusiveness. Interviews of random inmates indicated that inmates were not asked the risk assessment questions again after the initial screening. A review of the assessment and reassessment process, as well as interviews of staff who perform risk screening, found that the reassessment consisted of a computer check regarding the inmate adjustments while at the facility. The reassessment process failed to get any additional input from the inmate. Through a Corrective Action Plan, the facility revised the reassessment process to ensure staff meet with the inmate within 30 days of arrival to conduct the reassessment. This process includes asking the inmate the required screening questions at the reassessment to ensure the responses are updated within 30 days of arrival at the facility. Documentation over a period of time during the CAP was submitted to the auditor for review to demonstrate the reassessments are compliant with the revised process. Based upon a review of this documentation, this section is now found to be compliant.

§115.41 (h): DCDC PREA manual indicates that inmates shall not be disciplined for refusing to answer or for not disclosing complete information in response to questions to the screening. Interviews of staff who perform risk screening support that the facility do not discipline inmates as noted in the PREA manual above.

§115.41 (i): DCDC PREA manual states appropriate controls shall be implemented on dissemination within facility of responses to questions asked pursuant to this standard to ensure that sensitive information is not exploited to inmate's detriment by staff or other inmates. Interviews with the PREA coordinator support that appropriate controls of the responses to the risk assessment questions are limited by those who have access to this particular section of the jail tracker.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- 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 No

- 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 No
- 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 No
- 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 No
- 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 No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- 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 No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- 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 No

115.42 (e)

- 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 No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- 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 No NA
- 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 No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews

- a. Risk Screening Staff
- b. PREA Coordinator
- c. Gay Inmates

§115.42 (a): DCDC PREA manual states information from risk screening shall be used for housing, bed, work, education and program assignments with goal of keeping separate inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. Interviews of staff who perform risk screening support the screening information is used to make housing decisions. The PREA Coordinator detailed how the Class D Coordinator reviews the screening information to ensure good decisions when assigning inmates to work details and programs.

§115.42 (b): The PAQ as well as interviews of staff who perform risk screening support that the agency makes individualized determinations about how to ensure the safety of each inmate.

§115.42 (c): DCDC PREA manual states in deciding whether to assign transgender or intersex inmates to areas for male or female inmates and in making other housing and programming assignments, consideration shall be made on a case-by-case basis whether placement would ensure inmate's health and safety and whether placement would present management or security problems. The facility reported there were no transgender/intersex inmates at the facility.

§115.42 (d): DCDC PREA manual states placement and programming assignments for transgender or intersex inmates shall be reassessed at least twice each year to review threats to safety experienced by these inmates. The facility reported there were no transgender/intersex inmates at the facility. Interviews of staff who perform risk screening support that the PREA manual is followed.

§115.42 (e): DCDC PREA manual states transgender or intersex inmate's own views with respect to his/her own safety shall be given serious consideration. The facility reported there were no transgender/intersex inmates at the facility. Interviews of staff who perform risk screening support that the PREA manual is followed.

§115.42 (f): DCDC PREA manual states transgender and intersex inmates shall be given opportunity to shower separately from other inmates. The facility reported there were no transgender/intersex inmates at the facility. Interviews of staff who perform risk screening support that the PREA manual is followed. The audit team observed the shower areas and most of the showers allow for individual showering. The PREA Coordinator indicated any transgender or intersex inmates that request to shower separately would be allowed to do so.

§115.42 (g): DCDC PREA manual states lesbian, gay, bisexual, transgender or intersex inmates shall not be placed in dedicated facilities, units or wings solely based on identification or status. Interviews of gay inmate support the PREA manual is followed.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- 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 No

- 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 No

115.43 (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 No
- 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 No
- 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 No
- 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 No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA

115.43 (c)

- 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 No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- 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 No
- 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 No

115.43 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Jailer
 - b. Staff who Supervise Inmates in Segregated Housing

§115.43 (a): DCDC PREA manual states inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless assessment of available alternatives has been made and determination has been made that there is no available alternative means of separation from likely abusers. If assessment cannot be conducted immediately, inmate may be held in involuntary segregated housing for less than 24 hours while completing assessment. Interviews of the Jailer support that the PREA manual is followed.

§115.43 (b): DCDC PREA manual states inmates placed in segregated housing for this purpose shall have access to programs, privileges, education and work opportunities to the extent possible. If access to these opportunities are restricted, documentation shall include:

1. Opportunities that have been limited
2. Duration of limitations
3. Reasons for limitations

Interviews of staff that supervise inmates in segregated housing support that the PREA manual is followed. While on site, there were no inmates being held in segregation due to high risk for sexual victimization.

§115.43 (c): DCDC PREA manual states such inmates shall be assigned to involuntary segregated housing only until alternative means of separation from likely abusers can be arranged and such assignment shall not ordinarily exceed a period of 30 days. Interviews of the Jailer and of staff who

supervise inmates in segregation support that inmates are placed into involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged.

§115.43 (d): DCDC PREA manual states if involuntary segregated housing assignment is made, documentation shall clearly include:

1. Basis for concern for inmate's safety
2. Reason why no alternative means of separation can be arranged

The facility reported there had been no inmates placed in involuntary segregation for this reason during the audit period.

§115.43 (e): DCDC PREA manual states each such inmate shall be afforded a review every 30 days to determine whether there is continuing need for separation from general population. Interviews of staff who supervise inmates in segregation support the PREA manual is followed and documentation would be completed on an incident report form.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No

115.51 (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 No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request?
 Yes No
- 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 No NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate Handbook
 - c. DCSO MOU
2. Interviews
 - a. Random Staff
 - b. Random Inmates

§115.51 (a): DCDC PREA manual states inmates may use multiple methods to privately report sexual abuse/harassment, retaliation by other inmates or staff for reporting sexual abuse/harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. Internal methods listed in the inmate handbook include Kiosk (under the PREA or Grievance tab), or a Verbal report (to any staff, medical, chaplain, or volunteer). Methods to report are also posted on the entrance door to each cell area. Calls can be made to a facility representative. The phone was tested by the audit team in one of the cell areas and successfully connected to the facility control center deputy who indicated he could accept such a report.

§115.51 (b): DCDC PREA manual indicates inmates may contact outside law enforcement agency:

1. To report such incidents to an agency that is not part of DCDC
2. Who can receive and immediately report such activity to DCDC officials
3. And remain anonymous upon request

Methods of outside reporting are listed in the Inmate handbook as well as the cell entrance area. Methods include Crime Stoppers, Daviess County Sheriff (DCSO), and Kentucky State Police. Phone calls could be made to Crime Stoppers and the inmate phones were tested by the audit team and a successful call was made to Crime Stoppers.

The MOU between DCDC and DCSO documents that an outside reporting entity has been established by stating DCSO shall receive and immediately forward to a DCDC supervisor, all reports of sexual abuse/harassment that occurred at DCDC, to include third party and anonymous reports.

§115.51 (c): DCDC PREA manual states e. Staff/visitors shall accept reports made verbally, in writing, anonymously and from third parties and immediately report information to supervisor, in person if possible, in a confidential area. Staff/visitors shall promptly document all verbal reports in writing or in an email and forward to supervisor. The auditor reviewed a report that demonstrated staff accepted both verbal and written reports from inmates regarding sexual abuse and documented such verbal reports. Interviews of random staff and inmates support that staff accept all reports and document them properly.

§115.51 (d): DCDC PREA manual provides a list of methods for staff to anonymously report incidents of sexual abuse and sexual harassment by sending an unsigned document to command staff, or by calling Crime Stoppers. Interviews of random staff support that staff have a private method to report incidents of sexual abuse and sexual harassment of inmates. Methods to report privately included Crime Stoppers, DCSO, Owensboro Police Department, sending through outside mail anonymously, and others.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

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

115.52 (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 No NA
- 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 No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- 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 No NA

115.52 (d)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (e)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (f)

- 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 No NA

- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA

115.52 (g)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate handbook
2. Interviews

a. None

§115.52 (a): The DCDC PREA manual provides an administrative process to address inmate grievances regarding sexual abuse. During the on-site visit, the audit team was able to observe the grievance process to be initiated through the kiosk.

§115.52 (b): DCDC PREA manual states there is no time limit for an inmate to submit a grievance regarding an allegation of sexual abuse. Time limits may be applied to any portion of a grievance that does not allege an incident of sexual abuse. Inmates shall not be required to use any informal grievance process or to otherwise attempt to resolve with staff an incident of sexual abuse. There shall be no restrictions on the ability to defend against an inmate lawsuit on the grounds that applicable statute of limitations has expired. A review of the inmate handbook supports each component of section (b) is followed.

§115.52 (c): DCDC PREA manual states an inmate who alleges sexual abuse may submit a grievance without submitting it to staff who is subject of complaint. The inmate handbook states the reporter is not required to attempt to resolve issue with the other party involved.

§115.52 (d): DCDC PREA manual states a final decision shall be issued on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of grievance. Computation of the 90-day time period shall not include time consumed by inmate in preparing any administrative appeal. An extension of time to respond may be claimed, up to 70 days, if normal time period for response is insufficient to make an appropriate decision. Inmate shall be notified in writing of any such extension and provided a date by which decision will be made. At any level of administrative process, including the final level, if inmate does not receive response within time allotted for reply, including any properly noticed extension, the inmate may consider the absence of a response to be a denial at that level. The facility reports there have been no grievances filed regarding sexual abuse.

§115.52 (e): DCDC PREA manual states third parties, including fellow inmates, staff, family, attorneys and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on behalf of inmates. If a third-party should file such a request on behalf of an inmate, DCDC may require as condition of processing request that victim agree to have request filed on his/her behalf and may also require victim to personally pursue any subsequent steps in administrative remedy process. If inmate declines to have request processed on his/her behalf, the decline shall be documented. The facility reports there have been no grievances filed regarding sexual abuse.

§115.52 (f): DCDC PREA manual states procedures shall be established for filing of emergency grievance alleging an inmate is subject to substantial risk of imminent abuse. After receiving an emergency grievance alleging an inmate is subject to substantial risk of imminent sexual abuse, the grievance (or any portion thereof that alleges substantial risk of imminent sexual abuse) shall be forwarded to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours and shall document the determination whether inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The facility reports there have been no emergency grievances filed regarding sexual abuse.

§115.52 (g): DCDC PREA manual states the inmate may be disciplined for filing a grievance related to sexual abuse only where it is demonstrated that the grievance was filed in bad faith. The facility reports there have been no incidents where an inmate was disciplined for filing a grievance in bad faith.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- 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 No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (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 No

115.53 (c)

- 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 No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate Handbook
 - c. MOU
2. Interviews
 - a. Random Inmates
 - b. Inmates who Reported Sexual Abuse

§115.53 (a): DCDC PREA manual states inmates shall be provided 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. Reasonable communication shall be enabled between inmates and these organizations and agencies in as confidential a manner as possible. Interviews of random inmates indicate that most are not aware of the outside victim advocate that is made available for support through New Beginnings Sexual Assault Support Services. The contact information, to include addresses and phone numbers to allow free calls, is provided in the inmate handbook. Interviews of inmates who reported sexual abuse support that contact information for New Beginnings is provided when a report is made.

§115.53 (b): DCDC PREA manual states inmates shall be informed prior to giving them access to outside services of the extent to which such communications will be monitored and extent of which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. A review of posted information as well as pamphlets available for New Beginnings failed to provide the above information as noted above in the PREA manual. However, after the on-site visit, the facility made revisions to both the Inmate Handbook and the PREA manual that were forwarded to the auditor for review. The revisions included the extent the communications with New Beginnings is monitored, as well as language that details the extent of which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Based upon the revisions that now demonstrate that inmates are properly informed prior to giving them access to such services, this section of the PREA standard is now found to be compliant.

§115.53 (c): DCDC PREA manual states a memoranda of understanding (MOU) shall be maintained or attempts to enter into such agreements shall be made with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. Copies of agreements or documentation showing attempts to enter into such agreements shall be maintained. The auditor reviewed the current MOU with New Beginnings Rape Crisis Center that details services provided as required by standard.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. DCDC Website
2. Interviews
 - a. None

DCDC PREA manual provides methods for third parties to report on behalf of the inmate. The auditor reviewed the agency website to confirm that the methods are posted for the public to view.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- 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 No
- 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 No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (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 No

115.61 (c)

- 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 No
- 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 No

115.61 (d)

- 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 No

115.61 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Random Inmates
 - b. PREA Coordinator
 - c. Jailer
 - d. Medical and Mental Health Staff

§115.61 (a): DCDC PREA manual states staff/visitors shall immediately report to supervisor, in person if possible, in a confidential area, all suspicions, knowledge or information regarding an incident of sexual abuse/harassment, to include, but not limited to:

1. Incidents that occurred in a facility, whether or not it is part of the agency
2. Retaliation against inmates or staff/visitors who reported such incidents
3. Staff neglect or violation of responsibilities that may have contributed to incident or retaliation

Interviews of random staff support they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility.

§115.61 (b): DCDC PREA manual states apart from reporting to supervisors, staff/visitors shall not reveal information related to such reports to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions. Interviews of random staff support that staff shall not reveal 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.

§115.61 (c): Interviews of medical and mental health staff support that inmates are informed of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. The audit team observed during the on-site visit signage as you enter the medical/mental health area that communicates this to inmates as they enter.

§115.61 (d)(e): DCDC PREA manual states if a victim is considered a vulnerable adult under a State or local vulnerable person's statute, the allegation shall be reported to the designated State or local services agency under applicable mandatory reporting laws. Mandatory reporting laws require that all abuse, neglect or exploitation be reported when victim is a child or an adult who is unable to protect themselves due to a disability. In such a case, the allegation shall be immediately reported to supervisor, who will ensure that it is reported to the Cabinet for Health and Family Services, Division of Protection and Permanency, 3649 Wathens Crossing, Owensboro KY 42301, 270-687-7491. Interviews with the Jailer and the PREA Coordinator support they report such allegations as noted in the PREA manual above. The Jailer confirmed that all allegations of sexual abuse and harassment are reported to the appropriate investigator to be investigated.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Jailer
 - b. Random Staff

§115.62 (a): DCDC PREA manual states when staff/visitor learns that an inmate is possibly subject to substantial risk of imminent sexual abuse, immediate action shall be taken to protect inmate. Interviews of the Jailer, and of random staff support that the facility takes immediate action to protect the inmate when there is substantial risk of imminent sexual abuse.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Agency Head
 - b. Jailer

§115.63 (a): DCDC PREA manual states upon receiving an allegation that an inmate was sexually abused while confined at another facility, jailer shall notify head of other facility where abuse occurred. The facility reports that no inmates made allegations at DCDC where the incident occurred at another facility.

§115.63 (b)(c): DCDC PREA manual states notification shall be provided as soon as possible, but no later than 72 hours after receiving allegation. Notification shall be documented. The facility reports that no inmates made allegations at DCDC where the incident occurred at another facility.

§115.63 (d): DCDC PREA manual states facility head that receives such notification shall ensure allegation is investigated. The PAQ listed 2 incidents, where allegations from another facility were received. The interview with the Jailer/Agency Head indicated the jail has been notified of such allegations and the Jailer received the call and forwarded the information to his investigator to investigate the allegation.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- 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 No
- 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 No
- 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 No

- 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 No

115.64 (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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Random Staff
 - b. Inmates who Reported Sexual Abuse

§115.64 (a)(b): DCDC PREA manual has language that supports each component of the standard. Interviews of random staff, to include non-security staff, support that staff had good knowledge of the responsibilities of a first responder. Interviews of inmates that had reported sexual abuse support that staff responded promptly and appropriately ensuring separation of alleged victim and abuser, preservation of evidence, to include placing inmates in areas to ensure physical evidence is not destroyed and preserved.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Jailer

§115.65 (a): DCDC PREA manual includes a written plan that coordinates actions of each of the required staff in response to an incident of sexual abuse. Interviews with the Jailer confirms the facility plan is written to ensure each of these staff areas have good knowledge of their responsibilities in response to an incident of sexual abuse.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- 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 limits 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 No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. None
2. Interviews
 - a. None

§115.66 (a): The PAQ, along with confirmation from the Jailer, indicates the agency has not entered into any collective bargaining agreement or other agreement that limits 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; therefore, the standard is found compliant.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- 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 No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (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 No

115.67 (c)

- 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 No
- 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 No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- 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 No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Agency Head
 - b. Jailer
 - c. Designated Staff Charged with Monitoring Retaliation
 - d. Inmates who Reported Sexual Abuse

§115.67 (a): DCDC PREA manual states protection from retaliation by other inmates or staff shall be provided to those who report sexual abuse/harassment or cooperate with investigations. Staff shall be designated to monitor possible retaliation. The PAQ list the PREA Coordinator as the staff member designated with such monitoring responsibilities. The investigative files reviewed supported the PREA Coordinator monitors for retaliation as required.

§115.67 (b): DCDC PREA manual states multiple protection measures shall be employed, such as housing changes or transfers for victims/abusers, removal of inmate/staff abusers from contact with victims and emotional support services for inmates/staff who fear retaliation for reporting sexual abuse/harassment or for cooperating with investigations. Interviews of the Jailer, as well as the PREA Coordinator, who is designated to monitor for retaliation indicated appropriate protection measures are employed for those who may fear retaliation. Detailed steps were provided to support compliance. Interviews of inmates who reported sexual abuse support protection is felt.

§115.67 (c)(d)(e): DCDC PREA manual states for at least 90 days following report of sexual abuse, conduct and treatment shall be monitored of inmates/staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates/staff and action shall be taken promptly to remedy retaliation. Items that should be monitored include inmate disciplinary reports, housing or program changes and negative performance reviews or staff reassignments. Monitoring shall be continued beyond 90 days if initial monitoring indicates continuing need. For inmates, monitoring shall also include periodic status checks. If any other individual who cooperates with investigation expresses fear of retaliation,

appropriate measures shall be taken to protect that individual against retaliation. Obligation to monitor shall terminate if allegation is determined to be unfounded. A review of the Investigative files supports that active monitoring for retaliation is being conducted as required following a report of sexual abuse. Interviews of the Jailer and Staff member designated to monitor for retaliation support that all steps required in standard are conducted.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- Documents: (Policies, directives, forms, files, records, etc.)
 - DCDC PREA manual
- Interviews
 - Jailer
 - Staff who Supervise Inmates in Segregated Housing

§115.68 (a): DCDC PREA manual states use of segregated housing to protect an inmate who has suffered sexual abuse shall be subject to requirements of the "Protective Custody" section in this manual. The facility reports there have been no inmates housed in protective custody for this purpose during the audit period. Interviews of the Jailer indicate that inmates would be housed in protective custody only until alternative housing can be found. Interviews with staff who supervise inmates in segregated housing confirm the Jailer's response and go on to indicate these inmates would also be afforded access to programs, privileges, and educational opportunities. Any restriction would be properly documented, and inmate's status reviewed every 30 days.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- 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 No NA

115.71 (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 No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- 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 No
- 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 No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- 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 No

115.71 (g)

- 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 No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- 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 No

115.71 (j)

- 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 No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (l)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Investigation file reviews
 - c. Training file reviews
2. Interviews
 - a. Investigative Staff
 - b. Jailer
 - c. PREA Coordinator

§115.71 (a)(b): DCDC PREA manual states when investigations into allegations of sexual abuse/harassment are conducted by staff investigators, they shall be conducted promptly, thoroughly and objectively for all allegations, including third-party and anonymous reports. When sexual abuse is alleged, investigators who have received special training in sexual abuse investigations shall be used. Interviews with Investigators, as well as training and investigative file reviews confirm the PREA manual is followed.

§115.71 (c): DCDC PREA manual states investigators shall gather and preserve direct and circumstantial evidence, gather available physical and DNA evidence, gather electronic monitoring data, interview victims, suspected abusers and witnesses, review prior complaints and reports of sexual abuse involving suspected abuser. Interviews with the investigators support they have good knowledge of the investigative process as each were able to describe the steps in detail, to include description of evidence they rely upon during such an investigation.

§115.71 (d)(e): DCDC PREA manual states when quality of evidence appears to support criminal prosecution, compelled interviews shall be conducted only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Credibility of victim, suspect or witness shall be assessed on individual basis and shall not be determined by person's status as inmate or staff. Inmate who alleges sexual abuse shall not be required to submit to polygraph examination or other truth-telling devices as condition for proceeding with investigation. Interviews of investigators support the above language contained in the PREA manual.

§115.71 (f)(g)(h)(i)(j): DCDC PREA manual states administrative investigations:

1. Shall include effort to determine whether staff actions or failures to act contributed to abuse
2. Shall be documented in written reports that include description of physical and testimonial evidence, reasoning behind credibility assessments and investigative facts and findings

The manual also included that criminal investigations shall be documented in written report that contains thorough description of physical, testimonial and documentary evidence and copies of documentary evidence where feasible. Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution. Written reports referenced in sections (g) and (h) of this section shall be retained for as long as abuser is incarcerated or employed by DCDC, plus five years. Departure of abuser or victim from employment or confinement shall not provide basis for terminating investigation. A review of investigative files confirm they are documented and contained the appropriate content. Interviews of investigators support each section and indicate criminal investigations are conducted by

outside law enforcement as referred by the agency as well as prosecution when substantiated allegations appear criminal. Reports are appropriately maintained.

§115.71 (I): DCDC PREA manual states when outside agencies investigate sexual abuse incident, command staff shall cooperate with investigators and shall endeavor to remain informed about progress of investigation. Compliance was confirmed during interviews with the Jailer and PREA Coordinator.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Investigative file reviews
2. Interviews
 - a. Investigative Staff

§115.72 (a): DCDC PREA manual states no standard shall be imposed higher than the preponderance of evidence in determining whether allegations of sexual abuse/harassment are substantiated. A review of investigative files as well as interviews of investigators confirm a preponderance of evidence is the standard used to determine if the allegation is to be substantiated.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- 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 No

115.73 (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 No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- 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 No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Jailer
 - b. Investigative Staff
 - c. Inmates who Reported Sexual Abuse

§115.73 (a)(b): DCDC PREA manual states following investigation into an inmate's allegation that he/she suffered sexual abuse in DCDC, inmate shall be informed whether allegation has been determined to be substantiated, unsubstantiated or unfounded. If staff investigators did not conduct investigation, they shall request relevant information from investigative agency in order to inform inmate. A review of investigative files, as well as interviews of the Jailer, investigators, and inmates who reported sexual abuse, support that inmates are informed as required.

§115.73 (c): DCDC PREA manual states following inmate's allegation that staff has committed sexual abuse against inmate, inmate shall subsequently be informed, unless allegation has been determined to be unfounded, whenever:

1. Staff is no longer posted within inmate's unit
2. Staff is no longer employed at DCDC
3. It is learned that staff has been indicted on charge related to sexual abuse within facility
4. It is learned that staff has been convicted on charge related to sexual abuse within facility

§115.73 (d): DCDC PREA manual states following inmate's allegation that he/she has been sexually abused by another inmate, victim shall be subsequently informed whenever it is learned that abuser has been:

1. Indicted on charge related to sexual abuse within facility

2. Convicted on charge related to sexual abuse within facility

A review of investigative files, as well as interviews of inmates who reported sexual abuse, support inmates are informed as required.

§115.73 (e): DCDC PREA manual states all notifications or attempted notifications shall be documented. A review of investigative files demonstrated the notifications are properly documented.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- 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 No

115.76 (d)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. None

§115.76 (a): DCDC PREA manual states staff shall be subject to disciplinary actions up to and including termination for violating department's sexual abuse/harassment policies. There were no incidents during the audit period where staff were disciplined for violating department's sexual abuse/harassment policies.

§115.76 (b): DCDC PREA manual states termination shall be presumptive disciplinary action for staff who engage in sexual abuse. There were no incidents during the audit period where staff were found to have engaged in sexual abuse.

§115.76 (c): DCDC PREA manual states disciplinary actions shall be commensurate with nature and circumstances of acts committed, disciplinary history and discipline imposed for comparable offenses by other staff with similar histories. There were no incidents during the audit period where staff were disciplined for violating department's sexual abuse/harassment policies.

§115.76 (d): DCDC PREA manual states all staff terminated for violations of sexual abuse/sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agency, unless activity was clearly not criminal. There were no incidents during the audit period where staff resigned or were terminated due to violating department's sexual abuse/harassment policies.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Jailer

§115.77 (a)(b): DCDC PREA manual states visitors who engage in sexual abuse of inmates shall be:

1. Prohibited from contact with inmates
2. Reported to law enforcement agency for criminal investigation

The manual also states visitors who violate any other sexual abuse/harassment policies shall be:

1. Reviewed for corrective action
2. Considered whether they should be prohibited from further contact with inmates.

The PREA manual defines contractors as "Additional Staff" so any contract staff at DCDC fall under the same guidelines as staff under 115.76. Interviews of the Jailer confirm that volunteers and contractors would be reported to law enforcement and relevant licensing if the act was criminal, no different from staff. The jailer also confirmed that separation would immediately occur in such cases to include pulling security clearances to prohibit further entrance to the facility.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- 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 No

115.78 (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 No

115.78 (c)

- 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 No

115.78 (d)

- 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 No

115.78 (e)

- 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 No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Inmate Handbook
2. Interviews
 - a. Jailer
 - b. Mental health Staff

§115.78 (a): DCDC PREA manual states inmates shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. A review of the inmate handbook reflects a formal disciplinary listing with low, medium, and high-class violations and potential penalties for each. This listing includes the charge of a sexual offense and goes on to instruct inmates that those that violate the law are subject to criminal prosecution.

§115.78 (b): DCDC PREA manual states disciplinary actions shall be commensurate with the nature and circumstances of abuse committed, disciplinary history and discipline imposed for comparable offenses by other inmates with similar histories. Interviews with the Jailer support the standard.

§115.78 (c): DCDC PREA manual states disciplinary process shall consider whether inmate's mental disabilities or mental illness contributed to behavior when determining what type of disciplinary action, if any, should be taken. Interviews with the Jailer support the standard

§115.78 (d): The PAQ indicates that the facility does not offer such therapy, counseling, or other interventions; therefore, this section is not applicable. Interviews with Mental Health confirm that such treatment is not available at the facility.

§115.78 (e): DCDC PREA manual states an inmate may be disciplined for sexual contact with staff only upon a finding that staff did not consent to such contact.

§115.78 (f): DCDC PREA manual states for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that conduct occurred, shall not constitute falsely reporting an incident or lying, even if investigation does not establish evidence sufficient to substantiate allegation.

§115.78 (g): DCDC PREA manual states sexual activity between inmates is prohibited but does not constitute sexual abuse if determined that activity is not coerced.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- 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 No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Mental Health file review
2. Interviews
 - a. Inmates who Disclose Sexual Victimization at Risk Screening
 - b. Risk Screening Staff
 - c. Medical and Mental Health Staff

§115.81 (a)(c): DCDC PREA manual states if intake screening indicates inmate has experienced prior sexual victimization, whether it occurred in institutional setting or in community, staff shall ensure inmate is offered follow-up meeting with medical/mental health practitioner within 14 days of intake screening. The facility provided documentation to support that inmates are offered a follow-up meeting as required in the PREA standard. Inmates are asked in both the risk screening and in the medical screening about prior victimization. The medical screening questions include for those inmates indicating “yes” to prior victimization an offer for follow-up by medical and/or mental health. The auditor reviewed multiple samples of these completed questions. Only one inmate was provided that had indicated prior sexual victimization, and when interviewed, the inmate indicated she had not requested any follow-up with medical or mental health. A review of this inmate’s mental health record indicated she was seen by mental health staff for triage purposes within the 14 days of the risk screening. Based upon the above information, these sections of the standard are found compliant.

§115.81 (b): DCDC is not a prison; therefore, this section is non-applicable.

§115.81 (d): DCDC PREA manual states information related to sexual victimization or abusiveness that occurred in institutional setting shall be strictly limited to medical/mental health practitioners and other staff as necessary to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments. As observed during the on-site visit, information related to such was limited to those as required and secured in a manner to ensure compliance.

§115.81 (e): Interviews with medical and mental health staff indicate that they had not had an incident where informed consent was required to be obtained. Initially, there was no documentation submitted that supported the facility had any document or procedure in place to ensure that informed consent was obtained before reporting information about prior sexual victimization that did not occur in an institutional setting. After the on-site review, there was further discussion regarding this process and a form was found and submitted that would be used to properly document informed consent. They reported all medical/mental health staff have been reminded of the purpose of this form if the situation occurs. The facility reported again at this time there had been no incidents during the audit period to require an informed consent form to be completed. The auditor reviewed the form submitted and it allows for the inmates to provided informed consent or declined consent, and contained the necessary language to support compliance if used in such cases.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- 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 No

115.82 (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 No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- 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 No

115.82 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

- Documents: (Policies, directives, forms, files, records, etc.)
 - DCDC PREA manual
 - Investigative file reviews

2. Interviews
 - a. Medical and Mental Health Staff
 - b. Inmates who Reported Sexual Abuse

§115.82 (a): DCDC PREA manual states victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical/mental health practitioners according to their professional judgment. Interviews of the medical staff support the standard is compliant as they confirm inmate victims receive timely, unimpeded access to emergency medical treatment as required in section (a). Interviews of inmates who have reported sexual abuse support such services are provided as required.

§115.82 (b): DCDC PREA manual states if no qualified medical/mental health practitioners are on duty at time report of recent abuse is made, staff first responder shall take preliminary steps to protect victim and immediately notify supervisor, in person if possible, in a confidential area, who shall notify appropriate medical/mental health practitioners. A review of investigative files indicate that medical/mental health was notified the same date the incident was referred for investigation.

§115.82 (c): DCDC PREA manual states victims of sexual abuse while incarcerated shall be 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. Interviews of medical staff indicate that inmates are offered these items when taken to the outside hospital. ***Recommend the medical department either get documentation this information is provided from the local hospital or develop a packet of information that can be offered to the inmate at the facility.***

§115.82 (d): DCDC PREA manual states treatment services shall be provided to victim without financial cost and regardless of whether victim names abuser or cooperates with investigation arising out of incident.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- 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 No

115.83 (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 No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- 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 No NA

115.83 (e)

- 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 No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- 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 No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. Medical and Mental Health Staff
 - b. Inmates who Reported Sexual Abuse

§115.83 (a): DCDC PREA manual states medical/mental health evaluations and treatment shall be offered to all inmates, and, as appropriate, treatment to those who have been victimized by sexual abuse in prison, jail, lockup or juvenile facility.

§115.83 (b): DCDC PREA manual states evaluation and treatment of such victims shall include follow-up services, treatment plans and, when necessary, referrals for continued care following their transfer to other facilities or their release from custody. Interviews of medical and mental health staff indicate that a mental health follow up is conducted for an assessment of needs and pamphlet provided with information regarding continued care. Interview of an inmate who reported sexual abuse indicated they met with mental health following the allegation and was provided information of New Beginnings.

§115.83 (c): DCDC PREA manual states victims shall be provided medical/mental health services consistent with community level of care. Interviews of medical and mental health staff support that community level of care is provided.

§115.83 (d): DCDC PREA manual states victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. The facility reports there were no incidents during the audit period where female inmates reported sexual abusive vaginal penetration.

§115.83 (e): DCDC PREA manual states if pregnancy results from conduct, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. Interviews with medical staff support that in such cases victims would receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. The facility report there were no incidents during the audit period where pregnancy resulted from sexual abuse.

§115.83 (f): DCDC PREA manual states victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Interviews of inmates who reported sexual abuse indicated that no offers had been provided for such testing. Discussion with the medical department regarding the incidents within the audit period confirmed no offers for such testing were provided nor had they been determined to be medically not appropriate to offer such testing. Through a Corrective Action Plan, the facility medical department, in consultation with the PREA Coordinator, reviewed all incidents of sexual abuse within the audit period to determine the appropriateness of an offer to conduct testing for sexually transmitted infections. Documentation containing a summary of the review was submitted to the auditor with the appropriate redaction as necessary. The review resulted in one case containing a victim that was offered such medical testing. The medical department, in consultation with the PREA Coordinator, have conducted a refresher of the current PREA manual, as noted above, to ensure an offer for such testing to victims as required by the PREA standard. This section is now found to be compliant.

§115.83 (g): DCDC PREA manual states treatment services shall be provided to victim without financial cost and regardless of whether victim names abuser or cooperates with any investigation

arising out of incident. Interviews of inmates who reported sexual abuse support services are provided at no cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- 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 No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- 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 No
- 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 No
- 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 No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- 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 No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Investigative file reviews
 - c. Incident reviews
2. Interviews
 - a. Jailer
 - b. Incident Review Team

§115.86 (a)(b): DCDC PREA manual states sexual abuse incident reviews shall be conducted at conclusion of every sexual abuse investigation, including where allegation has not been substantiated, unless allegation has been determined to be unfounded. Such reviews shall ordinarily occur within 30 days of conclusion of investigation. A review of investigative files found each completed investigation had received an incident review within 30 days. Also, the audit team reviewed completed incident review reports.

§115.86 (c): DCDC PREA manual states review team shall include command staff, with input from supervisors, investigators and medical/mental health practitioners. Interviews of the Jailer confirm the incident review team is made up of appropriate staff as required by the standard.

§115.86 (d): DCDC PREA manual indicates that the review team shall consider each of the required areas. A review of documentation of incident review reports indicate the team considers all required components. This is confirmed by the interviews of the Jailer and Incident Team members.

§115.86 (e): DCDC PREA manual states recommendations for improvement shall be implemented or reasons shall be documented for not doing so. The incident review report has a place for the Jailer to document implemented recommendations, or to provide reasons why recommendations were not implemented.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. Sexual Offense Allegation Reporting Form
 - c. PREA Allegation Log

§115.87 (a)(c): DCDC PREA manual states uniform data shall be collected for every allegation of sexual abuse at facility using a standardized instrument and set of definitions. Incident-based data collected shall include, at a minimum, data necessary to answer all questions from most recent version of Survey of Sexual Violence conducted by DOJ. The facility completes a Sexual Offense Allegation form that includes a set of definitions for each allegation that collects data necessary to complete the DOJ survey.

§115.87 (b)(d): DCDC PREA manual states incident-based data shall be aggregated at least annually. The data shall be maintained, reviewed and collected as needed from available incident-based documents, including reports, investigation files and sexual abuse incident reviews. The PREA annual log, investigative reports, allegation reporting forms, and incident review reports are compiled each year for aggregated data.

§115.87 (e): DCDC does not contract for the confinement of its inmates; therefore, this section of the standard is non-applicable.

§115.87 (f): DCDC PREA manual states, upon request, such data shall be provided from previous calendar year to DOJ no later than June 30. Documentation provided to support that the facility does provide requested data to the DOJ annually.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- 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 No
- 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 No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.88 (c)

- 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 No

115.88 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
 - b. DCDC PREA Annual Report
2. Interviews
 - a. Agency Head (Jailer)
 - b. PREA Coordinator

§115.88 (a): PREA manual states data collected and aggregated shall be reviewed in order to assess and improve effectiveness of its sexual abuse prevention, detection and response policies, practices and training, including by:

1. Identifying problem areas
2. Taking corrective action on ongoing basis
3. Preparing annual report of findings and corrective actions for each facility, as well as department as a whole

The PREA Annual Report was reviewed and demonstrates that data collected and aggregated is reviewed as required by section (a). The review contained in the annual report includes Identifying problem areas and corrective action where necessary. Interviews of the Jailer and PREA Coordinator support that data is continuously reviewed in order to seek out ways for improvement.

§115.88 (b): DCDC PREA manual indicates the annual report shall include comparison of current year's data and corrective actions with those from prior years and shall provide an assessment of progress in addressing sexual abuse. A review of the annual report found that DCDC compares data from the current year to previous years. The annual report includes the facility's assessment of progress in addressing sexual abuse.

§115.88 (c): DCDC PREA manual states the annual report shall be approved by jailer and made readily available to public through website. The review of the annual report and the agency website support the Jailer has approved the annual report and that it is made available to the public on the agency website at www.daviesscojail.org.

§115.88 (d): DCDC PREA manual states specific material may be redacted from reports when publication would present clear and specific threat to safety and security of facility, but must indicate nature of material redacted. The review of the annual report found that it did not contain any information that would require redacting.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (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 No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

1. Documents: (Policies, directives, forms, files, records, etc.)
 - a. DCDC PREA manual
2. Interviews
 - a. PREA Coordinator

§115.89 (a): DCDC PREA manual states data collected shall be securely retained. Interviews of the PREA Coordinator confirm that she is the only one who has access to electronic data and the remaining data is secured in her office.

§115.89 (b)(c): DCDC PREA manual states aggregated sexual abuse data shall be made readily available to public at least annually through website. Before making aggregated sexual abuse data publicly available, personal identifiers shall be removed. The auditor reviewed the Annual Reports on the agency website, which contains aggregated data and had no personal identifiers.

§115.89 (d): DCDC PREA manual states sexual abuse data shall be maintained for at least 10 years after date of initial collection unless federal, state or local law requires otherwise. The auditor reviewed historical data previously maintained by the agency supporting compliance.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- 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 No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a “no” response does not impact overall compliance with this standard.*) Yes No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) Yes No NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? Yes No

115.401 (n)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

DCDC is a single facility agency. The previous final PREA audit report was signed September 16, 2016. The auditor had access to all areas of the audited facility. The auditor also received relevant documentation and was permitted to conduct private interviews. There was no evidence that inmates were prohibited from sending confidential correspondence to the auditor as the auditor receive one letter of correspondence.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

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

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The previous final PREA audit report was signed by the auditor September 16, 2016 with 100% compliance.

AUDITOR CERTIFICATION

I certify that:

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Bryan K Henson

March 12, 2020

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.