

# PREA Facility Audit Report: Final

**Name of Facility:** Norton Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 08/18/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Marc L Coudriet	<b>Date of Signature:</b> 08/18/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	Coudriet, Marc
<b>Email:</b>	usmc58312215@outlook.com
<b>Start Date of On-Site Audit:</b>	07/25/2022
<b>End Date of On-Site Audit:</b>	07/27/2022

FACILITY INFORMATION	
<b>Facility name:</b>	Norton Correctional Facility
<b>Facility physical address:</b>	11130 Road E4, P.O. Box 546, Norton, Kansas - 67654
<b>Facility mailing address:</b>	

Primary Contact	
<b>Name:</b>	Allison Basinger
<b>Email Address:</b>	allison.basinger@ks.gov
<b>Telephone Number:</b>	785.260.4658

Warden/Jail Administrator/Sheriff/Director	
<b>Name:</b>	Hazel Peterson
<b>Email Address:</b>	Hazel.Peterson@ks.gov
<b>Telephone Number:</b>	785-877-6654

Facility PREA Compliance Manager	
<b>Name:</b>	Luke Pfannenstiel
<b>Email Address:</b>	luke.pfannenstiel@ks.gov
<b>Telephone Number:</b>	O: (785) 877-3389
<b>Name:</b>	Anthony Kuhlmann
<b>Email Address:</b>	anthony.kuhlmann@ks.gov
<b>Telephone Number:</b>	O: (785) 202-0533

Facility Health Service Administrator On-site	
<b>Name:</b>	Renee Jones
<b>Email Address:</b>	rjones1@TeamCenturion.com
<b>Telephone Number:</b>	785-877-6708

Facility Characteristics	
<b>Designed facility capacity:</b>	977
<b>Current population of facility:</b>	747
<b>Average daily population for the past 12 months:</b>	852
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18-82
<b>Facility security levels/inmate custody levels:</b>	Minimum, Low Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	259
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	124
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	42

AGENCY INFORMATION	
<b>Name of agency:</b>	Kansas Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	714 SW Jackson Street, Suite #300, Topeka, Kansas - 66603
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

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

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Allison Basinger	<b>Email Address:</b>	allison.basinger@Ks.gov

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
<b>Number of standards exceeded:</b>	
3	<ul style="list-style-type: none"> <li>• 115.13 - Supervision and monitoring</li> <li>• 115.17 - Hiring and promotion decisions</li> <li>• 115.43 - Protective Custody</li> </ul>
<b>Number of standards met:</b>	
42	
<b>Number of standards not met:</b>	
0	

# POST-AUDIT REPORTING INFORMATION

## GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-07-25
2. End date of the onsite portion of the audit:	2022-07-27

### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Jennifer Hecker at Options Domestic & Sexual Violence Services, Inc.

## AUDITED FACILITY INFORMATION

14. Designated facility capacity:	977
15. Average daily population for the past 12 months:	852
16. Number of inmate/resident/detainee housing units:	13
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	887
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	44
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	44
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	1

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	1
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	4
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	23
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	1
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	13
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	70
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	1
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	None.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	259
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	42
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	124
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	None
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Selected random names from the housing roster from each housing area.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	None.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	18
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	4

62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	According to staff interviews, on-site review, and inmate rosters, there were no inmates in this category being housed at this facility.
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	1
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	2
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	6
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	1

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>According to staff interviews, on-site review, and inmate rosters, there were no inmates in this category being housed at this facility.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>None.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>Selected random staff from each shift using the current shift rosters.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>16</p>



<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

<p><b>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Agency contract administrator</li> <li><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</li> <li><input type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</li> <li><input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</li> <li><input checked="" type="checkbox"/> Medical staff</li> <li><input checked="" type="checkbox"/> Mental health staff</li> <li><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</li> <li><input checked="" type="checkbox"/> Administrative (human resources) staff</li> <li><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations</li> <li><input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations</li> <li><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</li> <li><input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</li> <li><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</li> <li><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</li> <li><input checked="" type="checkbox"/> First responders, both security and non-security staff</li> <li><input checked="" type="checkbox"/> Intake staff</li> <li><input type="checkbox"/> Other</li> </ul>
<p><b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the total number of CONTRACTORS who were interviewed:</b></p>	<p>1</p>

<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>None.</p>

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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### Was the site review an active, inquiring process that included the following:

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>Staff were very professional and accommodating.</p>

### Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Reviewed additional rosters, files, and reports while on-site.</p>
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## SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

### Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual abuse</b>	13	1	3	0
<b>Staff-on-inmate sexual abuse</b>	2	2	0	0
<b>Total</b>	15	3	3	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<b>Inmate-on-inmate sexual harassment</b>	12	0	0	0
<b>Staff-on-inmate sexual harassment</b>	1	0	0	0
<b>Total</b>	13	0	0	0

### Sexual Abuse and Sexual Harassment Investigation Outcomes

#### Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	1	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	1	1	0	0	0
<b>Total</b>	2	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	12	1	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	12	1	0

**Sexual Harassment Investigation Outcomes**

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	1	11	1	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	1	11	1	0

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

**Sexual Abuse Investigation Files Selected for Review**

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	5
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	3
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	1

<p>107. Did your selection of <b>SEXUAL HARASSMENT</b> investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
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**Inmate-on-inmate sexual harassment investigation files**

<p>108. Enter the total number of <b>INMATE-ON-INMATE SEXUAL HARASSMENT</b> investigation files reviewed/sampled:</p>	<p>1</p>
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<p>109. Did your sample of <b>INMATE-ON-INMATE SEXUAL HARASSMENT</b> files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of <b>INMATE-ON-INMATE SEXUAL HARASSMENT</b> investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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**Staff-on-inmate sexual harassment investigation files**

<p>111. Enter the total number of <b>STAFF-ON-INMATE SEXUAL HARASSMENT</b> investigation files reviewed/sampled:</p>	<p>0</p>
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<p>112. Did your sample of <b>STAFF-ON-INMATE SEXUAL HARASSMENT</b> investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>113. Did your sample of <b>STAFF-ON-INMATE SEXUAL HARASSMENT</b> investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>None.</p>
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**SUPPORT STAFF INFORMATION**

**DOJ-certified PREA Auditors Support Staff**

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>Non-certified Support Staff</b></p>	
<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>AUDITING ARRANGEMENTS AND COMPENSATION</b></p>	
<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify the name of the third-party auditing entity</p>	<p>PREA Auditors of America, LLC</p>



**Standards****Auditor Overall Determination Definitions**

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

**Auditor Discussion Instructions**

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

115.11	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.11(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Pre-Audit Questionnaire.</p> <p>IMPP 10-103D, Coordinated Response to Sexual Abuse and Harassment.</p> <p>NCF GO 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>Agency zero-tolerance statement.</p> <p>Organizational charts, interviews.</p> <p>FINDINGS:</p> <p>Agency Directives and PREA Plan address the requirements of this provision. The agency mandates a zero-tolerance directive towards all forms of sexual abuse and sexual harassment and outlines the agency's strategies on preventing, detecting, and responding to such conduct. Agency policies addressed "Preventing" sexual abuse and sexual harassment through the designation of a PREA Coordinator and PREA Compliance Manager, Criminal Background Checks (Staff, Contractors, and Volunteers, as applicable), Training (Staff, Volunteers, and Contractors), Staffing, Intake Screening, Classification, Inmate Education, Posting of Signage (PREA Posters, etc.) and Contract Monitoring. The Directives addressed "Detecting" sexual abuse and sexual harassment through Training (Staff, Volunteers, and Contractors), and Intake Screening.</p> <p>The policies addressed "Responding" to allegations of sexual abuse and sexual harassment through Reporting, Investigations, Victim Services, Medical and Mental Health Services, Disciplinary Sanctions for Staff (including notification to licensing agencies), Incident Review Teams, and Data Collections and Analysis.</p> <p>The Auditor noted the Inmate Handbook, PREA Posters, and PREA Brochures do address sexual abuse by another inmate, and the Inmate Handbook does address sanctions for inmates when involved in such conduct. Based on staff interviews and a review of practices, it was noted staff closely monitor for inmate-on-inmate sexual misconduct in accordance with PREA, allegations are reported and investigated, and inmates are held accountable.</p>	
<p>115.11(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Agency Directives and PREA Plan.</p> <p>Agency's organizational chart.</p> <p>ON-SITE REVIEW:</p> <p>No on-site observations were required for this provision.</p> <p>FINDINGS:</p> <p>Agency Directive(s) and PREA Plan address(es) the position of the agency PREA Coordinator, which outlines the roles and responsibilities of the position and calls for the position being allowed enough time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in each facility.</p> <p>The agency's organizational chart reflects that the agency PREA Coordinator position is an upper-level position with agency-wide oversight. The agency PREA Coordinator position reports directly to the Deputy Secretary of Corrections.</p> <p>The PREA Coordinator has enough time to focus on the PREA standards and the freedom to divert responsibilities to other staff as needed to focus on the audit. A review of the agency directive, agency's organization chart, and based on the interview with the designated agency's PREA Coordinator, the Auditor recommends the Agency considers hiring additional employees to assist the Agency PREA Coordinator with her PREA roles and responsibilities for the State of Kansas.</p>	
<p>115.11(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p>	

Norton Correctional Facility (NCF) organizational chart.

IMPP 10-103D, Coordinated Response to Sexual Abuse and Harassment.

NCF GO 08-106, Offender Sexual Abuse Prevention and Intervention.

**FINDINGS:**

IMPP 10-103D, Coordinated Response to Sexual Abuse and Harassment and NCF GO 08-106, Offender Sexual Abuse Prevention and Intervention, address the requirements identified in the standard. The agency has appointed a PREA Coordinator who reports to a Deputy Director of Corrections for the State of Kansas. The Warden has appointed a Corrections Manager I as the facility PREA Compliance Manager (PCM). The PCM reports directly to the Deputy Warden regarding all PREA related concerns. The agency PREA Coordinator and PCM confirmed through their actions that each has sufficient time and authority to coordinate efforts to comply with PREA standards, this Auditor recommends KDOC considers hiring additional employees to assist these positions throughout the state to ensure the PREA program continues to be maintained during times of employee absences and to reduce employee workload stress on the current PC and PCMs.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The agency reported there were a total of zero contracts for the confinement of inmates that the agency had entered or renewed with private entities or other government agencies.

<b>115.13</b>	<b>Supervision and monitoring</b>
<b>Auditor Overall Determination:</b> Exceeds Standard	
<b>Auditor Discussion</b>	
<p>115.13(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>KDOC's Internal Management Policy and Procedure 12-137D, Staffing Analysis, Operational Staffing and Roster Management.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>NCF General Order 08-106, Safety and Emergency, Offender Sexual Abuse Prevention and Intervention.</p> <p>NCF's Post Order, Shift Supervisor/Assistant Shift Supervisor.</p> <p>2022 Staffing Analysis</p> <p>Unit Logs</p> <p>Intermediate or Higher-Level Facility Staff</p> <p>FINDINGS:</p> <p>Policy IMPP 12-137D Staffing Analysis, Operational Staffing and Roster Management was provided for review in the PAQ. IMPP 12-137D Staffing Analysis, Operational Staffing and Roster Management provides a description of the required content of a staffing plan; generally accepted detention and correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal Investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plan (including blind spots or areas where staff or incarcerated offenders may be isolated; the composition of the incarcerated offenders population; the number and placement of supervisory staff; facility programs occurring on a particular shift; any applicable state or local law, regulation or standard; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors, including what documented instances of deviation from the operational staffing plan, with regard to staffing. NCF reported an average daily population of 852 in the past 12 months. The PREA Coordinator reported that when the staffing plan was created it was based on a population of 977 inmates.</p> <p>When assessing adequate staffing levels, the need for video monitoring, and how the facility staffing plan is constructed NCF considers generally accepted detention and correctional practices, any judicial, federal investigative agencies, or internal or external oversight bodies findings of inadequacy; components of the facility's physical plant; inmate population composition; number and placement of supervisory staff; institution programs; any applicable state or local laws, regulations, or standards; substantiated or unsubstantiated incidents of sexual abuse; and other relevant factors. Additionally, if adequate staffing levels were to get low the facility has identified post that could be "collapsed" to ensure inmates are protected against sexual abuse. Video monitoring is used only to supplement staffing levels and not to replace staff. The Warden or her designee meets with the Chief of Security every day to go over compliance of the staffing plan.</p> <p>The 2022 Staffing Plan was provided in the PAQ and reviewed. The plan was signed by the Warden and no discrepancies were found.</p> <p>115.13(b) (c) (d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>The agency reported there were deviations with the staffing plan in place, documentation was reviewed, and proper alternate staffing plan procedures were reviewed and deemed appropriate for this facility.</p> <p>FINDINGS:</p> <p>Based on the staff interviews, there has been deviations with the staffing plan in place, documentation reviewed, and proper alternate staffing plan procedures are in place which allows for all essential posts to be filled each shift.</p> <p>During the on-site audit, a review of the agency directive, staff interviews, and the facility's current staffing plan indicate all the elements of this standard are in place.</p> <p>115.13(e)</p>	

**DIRECTIVE AND DOCUMENT REVIEW:**

KDOC's Internal Management Policy and Procedure 12-137D, Staffing Analysis, Operational Staffing and Roster Management.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

NCF General Order 08-106, Safety and Emergency, Offender Sexual Abuse Prevention and Intervention.

NCF's Post Order, Shift Supervisor/Assistant Shift Supervisor.

2022 Staffing Analysis

Unit Logs

**INTERVIEWS:**

Intermediate and Higher-Level Facility Staff

**ON-SITE REVIEW:**

A review of log entries indicated the upper management unannounced rounds, which are separately documented, are documented and provide additional supporting documentation.

**FINDINGS:**

Agency Directive(s) and PREA Plan address(es) this provision. Logbooks are used to document unannounced rounds, which are the responsibility of the posted officer to maintain. Intermediate and Higher-Level Facility Staff were interviewed by the Auditor.

Staff reported different strategies utilized to prevent staff from alerting other staff that an unannounced round was being conducted.

A review of the agency directive and staff interviews indicate multiple levels of management conducting unannounced rounds on all shifts. The senior management rounds are also documented in the post logbook. This Auditor recommends the KDOC considers additional funding for Norton Correctional Facility for the procurement of additional cameras to be placed in the locations identified to the PREA Compliance Manager and the PREA Coordinator during the on-site review. This will enhance the safety and security of the staff and inmates at the Norton Correctional Facility and NCF - East Unit.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.14(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no document to review for the audit.</p> <p>FINDINGS:</p> <p>The audited facility does not house youthful inmates.</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.15(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 12-103: Offender and Facility Searches.</p> <p>Orientation Training Logs.</p> <p>Lesson Plan: Offender Pat Searches.</p> <p>INTERVIEWS:</p> <p>Random Sample of Staff</p> <p>Transgender Inmate</p> <p>FINDINGS:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment and Internal Management Policy and Procedure 12-103: Offender and Facility Searches, address the requirements of the standard. Norton Correctional Facility does not permit cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or when performed by medical practitioners. There was no cross-gender visual body cavity or strip searches conducted at the facility during the audit period. Officers would be required to document all cross-gender strip searches and cross-gender visual body cavity searches. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the inmates of the opposite gender except in exigent circumstances. Staff interviews also confirmed that male and female officers had been trained to conduct cross-gender pat searches. As confirmed by observations during the on-site review of housing units, inmates are permitted to shower, perform bodily functions, and change clothing privately. The agency and facilities have a “knock and announce” policy and procedures requiring staff of the opposite gender to announce their presence or otherwise notify the inmates when entering an inmate housing unit. Inmate interviews confirmed that staff members of the opposite gender announce their presence in this manner when entering housing units. The practice was observed during the on-site review of the entire facility. Staff would not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. Interviews with inmates confirmed that they had been pat searched by officers properly and professionally. Interviews with staff/inmates, auditor observations and an examination of policy/supporting documentation confirm compliance with this standard.</p> <p>The agency reported there have been no incidents of cross-gender strip or cross-gender visual body cavity searches of inmates.</p> <p>115.15(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 12-103: Offender and Facility Searches.</p> <p>Orientation Training Logs.</p> <p>Lesson Plan: Offender Pat Searches.</p> <p>INTERVIEWS:</p> <p>Random Selection of Staff</p> <p>Random Selection of Inmates.</p> <p>FINDINGS:</p>	



Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment and Internal Management Policy and Procedure 12-103: Offender and Facility Searches, address the requirements of the standard. Agency directive requires strip searches are conducted by staff of the same gender as the inmate.

The agency reported there have been no incidents of cross-gender strip or cross-gender visual body cavity searches of inmates. The Auditor interviewed a random selection of staff and random selection of inmates.

Staff reported they are prohibited from conducting cross-gender strip searches but are trained to conduct cross-gender pat-down searches.

Staff reported there is always adequate levels of staffing to ensure cross-gender strip searches do not occur. All staff reported they had not conducted a cross-gender strip search or heard of one taking place since their employment with the agency. All inmates interviewed reported they have been always searched only by same-gender staff. A review of the agency directive and staff interviews indicates no cross-gender strip searches have been conducted. Inmate interviews confirmed no cross-gender strip searches are conducted.

The Auditor noted, although agency policy prohibits cross-gender strip searches, staff are trained to conduct cross-gender pat-down searches in the event of an emergency or exigent circumstance.

115.15(c)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 12-103: Offender and Facility Searches.

Orientation Training Logs.

Lesson Plan: Offender Pat Searches.

**FINDINGS:**

Agency policy requires strip searches are conducted by staff of the same gender as the inmate.

The agency reported there have been no incidents of cross-gender strip or cross-gender visual body cavity searches of inmates, therefore, there was no documentation to review.

115.15(d)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 12-103: Offender and Facility Searches.

Orientation Training Logs.

Lesson Plan: Offender Pat Searches.

**INTERVIEWS:**

Random Selection of Staff, and Random Selection of Inmates.

**ON-SITE REVIEW:**

During the on-site review of the facility, the Auditor noted every time staff of the opposite gender entered a housing unit, the staff would announce themselves accordingly.

**FINDINGS:**

During the on-site audit, the Auditor observed there is no opportunity for staff of the opposite gender to view inmates performing bodily functions. Staff interviews reflected staff are aware of this standard and are required to announce themselves when entering a housing unit with inmates of the opposite gender and inmate interviews reflected staff of the opposite gender consistently announce themselves upon entering their housing units.

Inmates interviewed reported staff of the opposite gender do announce themselves and that they would never be in a state of undress in front of opposite gender staff.

A review of the agency policy, staff and inmate interviews, and observations of staff announcing themselves when entering a

housing unit with inmates of the opposite gender has demonstrated every precaution is made to ensure inmates are afforded privacy when using the toilet, showering, and changing clothes.

115.15(e)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 12-103: Offender and Facility Searches.

Orientation Training Logs.

Lesson Plan: Offender Pat Searches.

**INTERVIEWS:**

Random Sample of Staff.

Inmate interviews.

**FINDINGS:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment and Internal Management Policy and Procedure 12-103: Offender and Facility Searches, address the requirements of the standard. Staff interviews reflected staff are prohibited from searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Staff also reported the determination of the inmate's genital status would be made by medical staff. The inmates interviewed revealed the same.

115.15(f)

**DIRECTIVE AND DOCUMENT REVIEW:**

Training Curricula

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment and Internal Management Policy

Procedure 12-103: Offender and Facility Searches, address the requirements of the standard.

**INTERVIEWS:**

Random Sample of Staff.

**FINDINGS:**

Training documentation reflected staff attended and participated in "Cross-Gender and Transgender Pat Searches" training during pre-service and refresher training is available online. A review of the agency directive, training documentation, and staff interviews indicate staff are prohibited from conducting cross-gender strip searches or visual body cavity searches, however, all staff are trained on how to conduct cross-gender pat-down searches if exigent circumstances exist which exceeds the requirements of this provision.

115.16	Inmates with disabilities and inmates who are limited English proficient
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.16(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 10-138D: Assistance for Offenders and/or Victims with Limited English Proficiency.</p> <p>PREA Inmate Education Brochure (English and Spanish versions)</p> <p>Sexual Assault Brochure (English and Spanish versions)</p> <p>Photographs of inmate bulletin boards</p> <p><b>INTERVIEWS:</b></p> <p>Inmates</p> <p>Random Staff</p> <p>Specialized Staff</p> <p><b>FINDINGS:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment and Internal Management Policy and Procedure 10-138D: Assistance for Offenders and/or Victims with Limited English Proficiency, address the requirements of the standard.</p> <p>Through policy and practice, the facility ensures that inmates with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment.</p> <p>All PREA related information (written information), including postings, brochures and handouts are available in English and Spanish. Staff also read information to inmates when necessary. Translation services are available through a contracted language service for inmates who are not English proficient, and the facility has staff who are proficient in languages other than English. The facility does not rely on inmate interpreters, inmate readers or other types of inmate assistance in the performance of first responder duties or during the investigation of an inmate's allegations. Interviews with first responders, medical, mental health and investigative staff confirmed their awareness of the prohibition of using inmate interpreters for PREA compliance functions. Interview with a non-English proficient inmate confirmed the availability and use of the staff and telephonic interpretive services. Interviews with staff, other inmates and an examination of policy/supporting documentation also confirm compliance with this standard.</p> <p>115.16(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Policy, PREA Plan and review of posters, inmate handbooks, training certificates. Staff have been identified as bilingual and are available as needed.</p> <p><b>INTERVIEWS:</b></p> <p>Inmates.</p> <p><b>FINDINGS:</b></p> <p>Agency Policy, PREA Plan and review of posters, inmate handbooks, training certificates, addresses this provision. At the time of the audit, 1 Limited English Proficient (LEP) inmate was interviewed. The inmates reported getting the PREA related information in Spanish and the posters are translated correctly.</p> <p>115.16(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p>

Agency Policy, PREA Plan and review of posters, inmate handbooks, and training certificates.

**INTERVIEWS:**

Random Sample of Staff. At the time of the audit, there were 1 Limited English Proficient (LEP) inmate (Spanish Only) was interviewed.

**FINDINGS:**

Agency Policy, PREA Plan and review of posters, inmate handbooks, training certificates, address this provision. NCF staff have been identified and can translate in Spanish. Staff interviewed reported they would never use inmates to interpret for another inmate unless there was an emergency and there was not enough staff to interpret. The LEP inmate interviewed reported being provided PREA related information verbally from staff and understanding their rights as it pertained to PREA and had an understanding on how to report an allegation.

<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>115.17(a) (e)(h)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 02-119D: Personnel Records.</p> <p>Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Employee files.</p> <p>Mandatory Pre-Service PREA Questionnaire.</p> <p>Supporting Documentation.</p> <p><b>FINDINGS:</b></p> <p>Internal Management Policy and Procedure 02-119D: Personnel Records, Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process, and Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of</p> <p>Conduct and Undue Familiarity, address the requirements of the standard. All employees who have contact with inmates have had a full field background investigation in addition to fingerprinting. Employee backgrounds are re-checked annually. Contractors and volunteers who have regular contact with inmates also have criminal background checks completed prior to having contact with inmates. Volunteer and contractor background checks are repeated yearly. The facility does not hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor who may have contact with inmates who has engaged in any type of sexual abuse/harassment (no exceptions). Employees have a duty to disclose such misconduct and material omissions regarding such misconduct would be grounds for termination. Submission of false information by any applicant is grounds for not hiring the applicant.</p> <p>The Human Resource Manager was interviewed and confirmed that the agency attempts to contact prior employers for information on substantiated allegations of sexual abuse or resignations which occurred during a pending investigation of sexual abuse. The Human Resource Manager also confirmed that the Norton Correctional Facility Human Resource Department, provides 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. The Norton Correctional Facility Human Resource Department notifies appropriate licensing/certifying agencies when professional staff members are terminated for substantiated allegations of sexual abuse or sexual harassment. A review of policy, personnel forms, and relevant supporting documentation, including staff interviews, and the annual background check vice five-year checks confirms they have exceeded compliance with this standard.</p> <p>115.17(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 02-119D: Personnel Records.</p> <p>Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Employee files.</p> <p>Mandatory Pre-Service PREA Questionnaire.</p> <p>Supporting Documentation.</p> <p><b>INTERVIEWS:</b></p>

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policy address this provision. The Auditor interviewed the Administrative (Human Resources) Staff. Staff reported the agency has incorporated and implemented the "Affirmative Duty to Disclose," which all staff were required to affirm and sign. The form includes a "material omissions" clause.

115.17(c)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 02-119D: Personnel Records.

Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.

Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of

Conduct and Undue Familiarity.

Employee files.

Mandatory Pre-Service PREA Questionnaire.

Supporting Documentation.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

The agency directive requires job applicants to have background checks completed looking at any issue of prior sexual misconduct. The background checks are completed prior to any inmate contact. All contractors are screened by using the same process. The Auditor interviewed the Administrative (Human Resources) Staff.

115.17(d)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 02-119D: Personnel Records.

Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.

Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of

Conduct and Undue Familiarity.

Employee files.

Mandatory Pre-Service PREA Questionnaire.

Supporting Documentation.

INTERVIEWS:

The Auditor interviewed the Administrative (Human Resources) Staff.

FINDINGS:

Agency Policy address(es) the elements of this provision. Agency policies defines staff to include volunteer or contracted program services staff. All staff are also subjected to a criminal background check.

115.17(f)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 02-119D: Personnel Records.

Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.

Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of

Conduct and Undue Familiarity.

Employee files.

Mandatory Pre-Service PREA Questionnaire.

Supporting Documentation.

INTERVIEWS:

Administrative (Human Resources) Staff.

FINDINGS:

Agency Policy address(es) this provision.

The application process includes the "Affirmative Duty to Disclose" form for new hires, volunteers and contractors, and a review of the HR files indicated this process was being implemented. All staff HR files reviewed indicated the forms had been signed in accordance with directive. A review of agency policies, HR files, and staff interviews, indicate the practice is in place and meets the requirements of this provision.

115.17(g)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 02-119D: Personnel Records.

Internal Management Policy and Procedure 02-126D: Recruitment and Selection Process.

Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of

Conduct and Undue Familiarity.

Employee files.

Mandatory Pre-Service PREA Questionnaire.

Supporting Documentation.

FINDINGS:

Agency Policy addresses this provision. Agency policy defines staff to include volunteer or contracted program services staff.

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.18(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 01-123D: Authorization for Construction, Renovation or Demolition of Physical Structures.</p> <p>FINDINGS:</p> <p>The facility is currently in the process of making an expansion or modification to the physical plant of one of their program buildings. Senior staff at this facility have considered how modifications to Norton Correctional Facility may enhance the agency's ability to protect inmates from sexual abuse prior to implementing the any enhancements/upgrades. The current space being modified has removed a wall, thus increasing the space and visual field for safety and security in that area.</p> <p>115.18(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Video Surveillance Schematic.</p> <p>FINDINGS:</p> <p>Interviews revealed NCF and agency staff would consider how such technology may enhance the agency's ability to protect inmates from sexual abuse prior to implementing the video enhancements/upgrades. It is recommended that NCF receive the funding to procure additional cameras to enhance the safety and security of the staff and inmates.</p>



115.21	Evidence protocol and forensic medical examinations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.21(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Memorandum of Understanding between Options Domestic &amp; Sexual Violence Services, Inc. and Norton Correctional Facility.</p> <p>Enforcement, Apprehension &amp; Investigations, Investigations Protocol Manual.</p> <p>INTERVIEWS:</p> <p>Random Staff.</p> <p>Off-site SAFE/SANE Staff.</p> <p>Inmates Who Reported a Sexual Abuse.</p> <p>FINDINGS:</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures and</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment, address the requirements of the standard.</p> <p>Staff interviewed indicated a clear knowledge of their responsibilities as potential first responders and knowledge of agency directive and staff roles and responsibilities pertaining to investigations of allegations of sexual abuse.</p>
	<p>115.21(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Memorandum of Understanding between Options Domestic &amp; Sexual Violence Services, Inc. and Norton Correctional Facility.</p> <p>Enforcement, Apprehension &amp; Investigations, Investigations Protocol Manual.</p> <p>FINDINGS:</p> <p>Agency Policies address(es) this provision. The audited facility offers all inmates a forensic examination if sexually abused. The medical staff will contact the local hospital for SANE/SAFE examinations.</p> <p>The facility reported zero SAFE/SANE examinations were conducted at a local hospital during the last 12 months. All forensic exams are at no cost to the inmate and are available at any time. Victim advocates that provide victim services are located at the hospital during the examination process. Community based victim advocate services can be provided, upon request.</p> <p>A review of the agency policies and supporting documentation indicated the agency coordinates and ensures the protocol implemented is appropriate and in compliance with this provision.</p> <p>115.21(c) (f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p>

Memorandum of Understanding between Options Domestic & Sexual Violence Services, Inc. and Norton Correctional Facility.

Enforcement, Apprehension & Investigations, Investigations Protocol Manual.

INTERVIEWS:

SAFE/SANE Staff

FINDINGS:

Interviews with correctional and health services personnel confirmed that they were all knowledgeable of the required procedures for obtaining, preserving, and securing physical evidence, when sexual abuse is alleged. Staff were aware that Enforcement, Apprehension and Investigation (EAI) conduct investigations relative to sexual abuse/harassment allegations. The agency follows a uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." Victims of sexual assault are referred to health services for initial examination and treatment.

Such treatment would be for life preservation only and the victim would be transported to a community hospital for examination, treatment and forensic evidence gathering by a Sexual Assault Nurse Examiner (SANE). All sexual abuse victim advocacy, examinations, treatment, testing, and follow-up care are provided without cost to the victim.

Routinely, administrative investigations are conducted by trained investigators who are full-time employees of EAI NCF. The review of training records confirmed that investigators have received investigator training on the investigation of sexual abuse and harassment in confinement settings. An examination of policy/supporting documentation also confirm compliance with this standard. No forensic exams were performed at a local hospital within the 12 months.

115.21(d)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Memorandum of Understanding between Options Domestic & Sexual Violence Services, Inc. and Norton Correctional Facility.

Enforcement, Apprehension & Investigations, Investigations Protocol Manual.

INTERVIEWS:

Inmates who had reported a sexual abuse during screening.

FINDINGS:

Victims of sexual assault are referred to health services for initial examination and treatment. Such treatment would be for life preservation only and the victim would be transported to a community hospital for examination, treatment and forensic evidence gathering by a Sexual Assault Nurse Examiner. All sexual abuse victim advocacy, examinations, treatment, testing, and follow-up care are provided without cost to the victim.

A review of the agency directive and staff interview indicated an established collaborative effort to ensure victim advocacy services are available for the inmates if needed.

115.21(e)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Memorandum of Understanding between Options Domestic & Sexual Violence Services, Inc. and Norton Correctional Facility.

Enforcement, Apprehension & Investigations, Investigations Protocol Manual.

INTERVIEWS:

Inmates who had reported a sexual abuse during screening.

FINDINGS:

Agency Policies address(es) this provision. NCF has an MOU for victim advocate services with Options Domestic & Sexual Violence Services, Inc. These services are available upon request from the inmate.

A review of the agency directive and staff interview indicated an established collaborative effort to ensure victim advocacy services are available for the inmates if needed.

115.22	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.22(a) (b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Documentation of completed investigations involving sexual abuse or sexual harassment allegations.</p> <p><b>FINDINGS:</b></p> <p>Policy requires administrative or criminal investigations to be completed on all allegations of sexual abuse/harassment. Administrative investigations are routinely assigned for completion by the EAI Investigator.</p> <p>If, during an investigation, evidence surfaces indicating criminal misconduct, the administrative case would be processed a criminal investigation. The EAI Investigator was aware of his responsibilities in the investigative process.</p> <p>The EAI Investigator conducts criminal investigations for Norton Correctional Facility involving inmate-on-inmate sexual abuse and staff-on-inmate criminal sexual abuse. An investigation would never be terminated due to an inmate being transferred or released or an employee leaving the agency.</p> <p>A review of training documents confirmed that all investigators received instruction in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff and an examination of policy/supporting documentation confirm compliance with this standard.</p> <p>115.22(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency's policies posted on the agency's website.</p> <p><b>FINDINGS:</b></p> <p>The agency's policy is posted on the agency's website in accordance with this provision.</p> <p>115.22(d)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>The agency is not required to respond to this provision.</p> <p><b>FINDINGS:</b></p> <p>This provision is not applicable as the agency is not required to respond to this provision.</p> <p>115.22(e)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>The agency is not required to respond to this provision.</p> <p><b>FINDINGS:</b></p> <p>This provision is not applicable as the agency is not required to respond to this provision.</p>

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.31(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 03-104D: Minimum Departmental Training Standards.</p> <p>Kansas Department of Correction PREA Basic Lesson Plan.</p> <p>Training Records.</p> <p>INTERVIEWS:</p> <p>Random Sample of Staff</p> <p>FINDINGS:</p> <p>Agency Policy address this provision. A review of the agency policy, training curriculum, various training documents, and staff interviews demonstrate PREA related training is conducted, and staff attend, participate, and complete the training. The agency policy and curriculum address all the required topics. The Auditor interviewed a total of 12 randomly selected staff. Staff interviewed acknowledged attending and participating in the PREA training and confirmed the required topics were covered during the training. The staff interviewed reported receiving training in all the required topics within the past year. Interviews revealed the staff have PREA training annually with their annual employee training, they are given PREA refresher training periodically throughout the year and the employees carry a PREA first responder response card and they have this information in a shared electronic folder they can access as needed.</p> <p>115.31(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 03-104D: Minimum Departmental Training Standards.</p> <p>Kansas Department of Correction PREA Basic Lesson Plan.</p> <p>Training Records.</p> <p>FINDINGS:</p> <p>Agency Policies this provision. All agency employees, contractors, and volunteers are trained to meet the PREA standards. In the past 12 months, (100%) staff were trained or retrained.</p> <p>The agency has a comprehensive training program which includes pre-service and annual in-service training and is tailored to meet the gender needs of the facility. The training documentation includes a signature roster that indicates the trainees understand the training presented.</p> <p>The interview process also documented those employees understood the materials presented. Refresher information is available in the electronic share folder. Staff reported everyone gets the exact same training regardless of working with male or female inmates in the agency.</p> <p>115.31(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 03-104D: Minimum Departmental Training Standards.</p> <p>Kansas Department of Correction PREA Basic Lesson Plan.</p> <p>Training Records.</p>

FINDINGS:

Agency policies require all to staff receive PREA related training during orientation and on an annual basis.

The Auditor reviewed randomly selected employee/contractor/volunteer training documents. A review of the randomly selected training documents reflected all had participated and completed the required PREA training.

Training documentation reviewed supported the participation of all correctional staff, including participation by management and administrative support staff, in the PREA training.

115.31(d)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 03-104D: Minimum Departmental Training Standards.

Kansas Department of Correction PREA Basic Lesson Plan.

Training Records.

FINDINGS:

The agency maintains the signed acknowledgement forms which affirm the trainees understand the training they have received. Through staff interviews, it was made clear to the Auditor that the staff understood the PREA training.

<b>115.32</b>	<b>Volunteer and contractor training</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.32(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 13-101D: Volunteering.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Department of Correction Orientation and Basic Volunteer Training Lesson Plan.</p> <p>Kansas Department of Correction Volunteer Training PowerPoint presentation.</p> <p>Volunteer Annual Training Records.</p> <p><b>INTERVIEWS:</b></p> <p>Contractor.</p> <p><b>FINDINGS:</b></p> <p>All contractors who have contact with inmates at this facility have been trained to understand the requirements of PREA and the zero-tolerance directive. One hundred percent of the contractors were trained about PREA. There were no volunteers at this facility during the on-site review.</p> <p>This was verified by examination of training documentation and the signatures that documented that they understood the training presented. An interview with one contractor verified that she understood the PREA requirements associated with being a contractor.</p> <p>115.32(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 13-101D: Volunteering.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Department of Correction Orientation and Basic Volunteer Training Lesson Plan.</p> <p>Kansas Department of Correction Volunteer Training PowerPoint presentation.</p> <p>Volunteer Annual Training Records.</p> <p><b>INTERVIEWS:</b></p> <p>Contractor.</p> <p><b>FINDINGS:</b></p> <p>The agency's PREA training addresses the zero-tolerance directive. Training documentation reflected training events held specifically for contract staff and volunteers.</p> <p>The Auditor interviewed one randomly selected contractor. The contracted staff interviewed reported being trained on the agency's zero-tolerance directive regarding sexual abuse and sexual harassment and of the reporting requirements.</p> <p>115.32(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 13-101D: Volunteering.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Department of Correction Orientation and Basic Volunteer Training Lesson Plan.</p> <p>Kansas Department of Correction Volunteer Training PowerPoint presentation.</p>	

Volunteer Annual Training Records.

**FINDINGS:**

The acknowledgment forms contained the proper affirmation statement. Through interviews, it was made clear the contract staff understood the PREA training.



<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.33(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Department of Correction Offender PREA Orientation.</p> <p>Kansas Department of Correction PREA Inmate Education Brochure.</p> <p>Kansas Department of Correction Offender's Guide to Sexual Assault Prevention Brochure.</p> <p>Norton Correctional Facility Orientation Acknowledgement Checklist.</p> <p><b>INTERVIEWS:</b></p> <p>Intake Staff.</p> <p>Inmates.</p> <p><b>FINDINGS:</b></p> <p>The intake staff reported the orientation packet contains all the PREA related information which is provided to all the inmates during the intake process. Staff reported the information may be provided to the inmate in Spanish or it could be read out loud to the inmates to ensure they understand it and that inmates are asked if they have any questions before they are assigned to a housing unit.</p> <p>Staff reported information on the zero-tolerance directive and how to report allegations are also contained on posters, which are posted throughout the facility.</p> <p>115.33(b) (d)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Department of Correction Offender PREA Orientation.</p> <p>Kansas Department of Correction PREA Inmate Education Brochure.</p> <p>Kansas Department of Correction Offender's Guide to Sexual Assault Prevention Brochure.</p> <p>Norton Correctional Facility Orientation Acknowledgement Checklist.</p> <p><b>INTERVIEWS:</b></p> <p>The Auditor interviewed staff assigned to intake duties and randomly selected inmates.</p> <p><b>FINDINGS:</b></p> <p>In the past 12 months, all inmates admitted to Norton Correctional Facility were trained on the principals of PREA.</p> <p>Provisions are made to assist those inmates with disabilities or those not proficient in English to ensure their understanding of PREA. Orientation, posters, inmate handbooks, etc. are readily available to the population and are available in English and Spanish. Inmates also have access to a computer program which also provides PREA information. Inmate telephones, examined by the auditor, also provide a reporting outlet. Staff interpreters and telephonic translation services are available to inmates who are not proficient in English or are otherwise unable to communicate (deaf, blind, mentally impaired, etc.).</p> <p>115.33(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Directives and BOP PREA Plan.</p>

Case files.

**INTERVIEWS:**

The Auditor interviewed randomly selected staff assigned to intake duties.

**FINDINGS:**

A review of random case files reflected all inmates had been provided the required PREA related information and education. Staff interviewed reported the information is provided during intake.

115.33(e)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Department of Correction Offender PREA Orientation.

Kansas Department of Correction PREA Inmate Education Brochure.

Kansas Department of Correction Offender's Guide to Sexual Assault Prevention Brochure.

Norton Correctional Facility Orientation Acknowledgement Checklist.

**FINDINGS:**

A review of case files reflected all inmates had been provided the required PREA related information and education.

The completed Acknowledgement Statement is used to document when inmates are provided the PREA information at intake. Inmates that participate in the subsequent PREA education have their participation entered into the inmate's record.

115.33(f)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Department of Correction Offender PREA Orientation.

Kansas Department of Correction PREA Inmate Education Brochure.

Kansas Department of Correction Offender's Guide to Sexual Assault Prevention Brochure.

Norton Correctional Facility Orientation Acknowledgement Checklist.

**ON-SITE REVIEW:**

PREA educational and informational materials, including PREA posters are available in each respective housing unit.

**FINDINGS:**

PREA educational and informational materials, including PREA posters are continuously available in each respective housing unit. The Inmate Handbook is available to the inmates during the intake process and made available upon request any time during their stay at Norton Correctional Facility.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34(a) (b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment. Enforcement, Apprehension &amp; Investigations, Investigations Protocol Manual.</p> <p>Kansas Department of Correction Specialized Investigator Training.</p> <p>Norton Correctional Facility Investigator Training Certificates.</p> <p>Norton Correctional Facility Orientation Acknowledgement Checklist.</p> <p><b>INTERVIEWS:</b></p> <p>Investigative Staff.</p> <p><b>FINDINGS:</b></p> <p>The facility investigators have received PREA specialized training through the Department of Justice (this training includes all requirements under 115.34b).</p> <p>The auditor reviewed specialized training documentation; administrative investigations are conducted by trained investigators who are full-time employees of the Kansas Department of Corrections. When criminal investigations are indicated, they are conducted by the same trained investigators. Interviews with staff, the investigators, and an examination of policy/supporting documentation confirm compliance with this standard.</p> <p>115.34(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment. Enforcement, Apprehension &amp; Investigations, Investigations Protocol Manual.</p> <p>Kansas Department of Correction Specialized Investigator Training.</p> <p>Norton Correctional Facility Investigator Training Certificates.</p> <p>Norton Correctional Facility Orientation Acknowledgement Checklist.</p> <p><b>FINDINGS:</b></p> <p>A review of the specialized training documents reflects all investigators had completed the required training. Training documentation reflected the investigators listed in the investigative files audited were trained on the specialized investigator training.</p> <p>115.34(d)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>The agency is not required to respond to this provision.</p> <p><b>FINDINGS:</b></p> <p>This provision is not applicable as the agency is not required to respond to this provision.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.35(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Health Services Policy and Procedures, Federal Sexual Assault Reporting Regulations.</p> <p>Centurion's PREA Training PowerPoint.</p> <p>KDOC Specialized Training Medical &amp; Mental Health Professionals PowerPoint.</p> <p>Medical and Mental Health Training Records.</p> <p>INTERVIEWS:</p> <p>Medical and Mental Health Staff</p> <p>FINDINGS:</p> <p>Training documentation reviewed indicated medical and mental health staff participated in the specialized medical and mental health PREA training.</p> <p>115.35(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Health Services Policy and Procedures, Federal Sexual Assault Reporting Regulations.</p> <p>Centurion's PREA Training PowerPoint.</p> <p>KDOC Specialized Training Medical &amp; Mental Health Professionals PowerPoint.</p> <p>Medical and Mental Health Training Records.</p> <p>INTERVIEWS:</p> <p>Medical Staff</p> <p>FINDINGS:</p> <p>The agency reported the facility's medical staff do not conduct forensic exams; therefore, this provision is not applicable. Medical staff interviewed confirmed they do not conduct forensic exams.</p> <p>115.35(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Health Services Policy and Procedures, Federal Sexual Assault Reporting Regulations.</p> <p>Centurion's PREA Training PowerPoint.</p> <p>KDOC Specialized Training Medical &amp; Mental Health Professionals PowerPoint.</p> <p>Medical and Mental Health Training Records.</p> <p>FINDINGS:</p> <p>The review of medical and mental health personnel training records by the auditor confirmed that these employees (part-time and full-time contractors) receive the same PREA training as all other correctional staff and have a duty to report when they have knowledge of sexual abuse/harassment, even when disclosed during a healthcare encounter.</p>	

Further review of training records confirmed that all mental health and medical staff have also received specialized training on victim identification, interviewing, evidence preservation, reporting and required clinical interventions. Training does not refer to certifications needed to conduct forensic examinations. All cases requiring the processing of sexual assault evidence collection kits are transported to a community hospital where Sexual Assault Nurse Examiners are always available.

Interviews with medical and mental health staff confirmed the provision of specialized training and that they are aware of their duty to report and address allegations and suspicions of sexual abuse/harassment. A review of the training documentation and policy also confirm compliance to this standard.

115.35(d)

**DIRECTIVE AND DOCUMENT REVIEW:**

Training records.

**FINDINGS:**

Training documentation reviewed reflected medical and mental health staff, including contract staff, participated in the general PREA training.

<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>115.41(a) (f) (g) (h)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 05-101D: Utilization, Confidentiality, Privacy, Security and Dissemination of Information Contained within Agency Records.</p> <p>PREA Application User Manual.</p> <p>Screening Documentation.</p> <p>INTERVIEWS:</p> <p>Staff responsible for risk screening: Unit Team Staff and Medical Staff.</p> <p>Randomly selected inmates.</p> <p>FINDINGS:</p> <p>All inmates are immediately assessed for a history of sexual abusiveness and risk of sexual victimization during in-processing. All inmates are assessed for their potential for being a victim or aggressor with an assessment instrument known as the Sexual Victimization and Abusiveness Assessment (SVA) electronically in the Total Access PREA System (TAPS) in accordance with the requirements listed in 115.41 d and e. Policy prohibits disciplining inmates for refusing to answer or for not disclosing complete information during the screening. If transferred to another facility, the inmate would receive an entirely new screening upon arrival. A member of the inmate's housing unit team screens all new arrivals within the first 72 hours of the inmate's arrival, but this activity ordinarily occurs within a few hours on the day of arrival.</p> <p>The review of screening documents by the auditor confirmed that inmates identified at high risk for sexual victimization or at risk of sexually abusing other inmates were referred to a mental health professional and all received further assessment. Staff also conduct screenings by reviewing records or other information from other facilities, new referrals, or for any other relevant reason. A unit team member reviews all relevant information from other facilities and continues to reassess an inmate's risk level within 28 days of his arrival.</p> <p>Unit Team Staff who screen for abusiveness and victimization and inmate interviews, a review of policy/supporting documentation and observations of the intake process confirmed compliance with this standard.</p>	
<p>115.41(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>PREA Screening Tool</p> <p>FINDINGS:</p> <p>The objective screening instrument is accomplished within the first 72 hours of arrival. The screening document does ask questions to determine if any inmate might have any prior history as a sexual abuser and the responses are documented. Based on the inmate record and responses, a decision is made to properly house the inmate. Unit Team Staff conduct the screening, and the information is secured.</p>	
<p>115.41(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>PREA Screening Tool</p> <p>INTERVIEWS:</p> <p>Staff responsible for risk screening</p> <p>FINDINGS:</p>	

The agency's PREA Screening Tool reflect all the required elements in this provision. Staff interviewed confirmed they use the agency's screening tool during intake. Staff interviewed properly referenced the required elements inmates are screened for during the risk screening process.

115.41(d)

**INTERVIEWS:**

Staff responsible for risk screening: Unit Team Staff and Medical Staff.

**FINDINGS:**

Staff reported the information is ascertained through inmate interviews, and from information collected through the PREA Screening tool, medical screening, and case file records.

115.41(e)

**FINDINGS:**

Unit Team Staff interviewed reported they do not have access to the inmate's medical or mental health information. The inmate's medical information is retained and only available to medical staff. Staff reported the treatment modality drives which staff need the information.

<b>115.42</b>	<b>Use of screening information</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.42(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 11-106: Case Management.</p> <p>Centurion General Health Services Policy and Procedures, Guidelines for Identification, Treatment and Correctional Management of Inmates Diagnosed with Gender Dysphoria.</p> <p>Sexual Victimization Assessment (SVA) Classification List.</p> <p><b>INTERVIEWS:</b></p> <p>LGBTI Inmates.</p> <p>Staff responsible for risk screening.</p> <p><b>FINDINGS:</b></p> <p>The information obtained in the inmate screening process is used to make individualized determinations to ensure the inmates safety. This information is used to make decisions to place each inmate in appropriate housing, work, and program assignments. The placement decisions are made by a classification committee. Staff interviewed reported information secured through the screening process is used to determine the need for additional medical or mental health follow-up, and to make classification decisions based on risk factors.</p> <p>115.42(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 11-106: Case Management.</p> <p>Centurion General Health Services Policy and Procedures, Guidelines for Identification, Treatment and Correctional Management of Inmates Diagnosed with Gender Dysphoria.</p> <p>Sexual Victimization Assessment (SVA) Classification List.</p> <p><b>INTERVIEWS:</b></p> <p>Staff, Medical and Mental Health Staff.</p> <p>Inmates who are at risk of sexual victimization.</p> <p>Inmates who reported sexual abuse at and after in-processing.</p> <p><b>ON-SITE REVIEW:</b></p> <p>During the on-site review, there was no indication that special housing units are used on a regular basis due to PREA risk factors.</p> <p><b>FINDINGS:</b></p> <p>Staff interviewed reported special housing is used as a last resort and staff look for other options, such as housing unit changes. Staff reported the welfare of the inmate is always a high consideration. Medical and mental health staff reported they would conduct daily visits for any inmates placed in special housing for PREA risk factors.</p> <p>115.42(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p>	



Internal Management Policy and Procedure 11-106: Case Management.

Centurion General Health Services Policy and Procedures, Guidelines for Identification, Treatment and Correctional Management of Inmates Diagnosed with Gender Dysphoria.

Sexual Victimization Assessment (SVA) Classification List.

INTERVIEWS:

LGBTI Inmates.

FINDINGS:

Staff interviewed reported the facility does not have specific housing units designated for lesbian, gay, bisexual, transgender, or intersex inmates. All housing, program and work assignments are made on a case-by-case basis.

115.43	<b>Protective Custody</b>
<b>Auditor Overall Determination:</b> Exceeds Standard	
<b>Auditor Discussion</b>	
<p>115.43(a)-1</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 20-108: Protective Custody.</p> <p>Internal Management Policy and Procedure 20-106 Administrative Segregation Review Board.</p> <p>General Order 15-103, Restriction Unit.</p> <p>INTERVIEWS:</p> <p>Inmates.</p> <p>FINDINGS:</p> <p>Norton Correctional Facility's Restrictive Housing houses both administrative (protective custody) and disciplinary cases.</p> <p>Policy states inmates at high risk for sexual victimization shall not be placed in involuntary special housing status unless an assessment of all available alternatives has been made and there is no available means of separating the victim from the abuser. The inmates would be reassessed every 7 days after entering special housing. If protection is necessary for an inmate, they may be transferred to another housing unit.</p> <p>To the extent possible, access to programs, privileges, education, and work opportunities would not be limited to inmates placed in Restrictive Housing for the purposes of protective custody, except when there are safety or security concerns. The facility would document the reasons for restricting access and the length of time the restriction would last. Mental health and unit team staff meet with each inmate in special housing status at least once each week. A case-by-case review is completed when considering all appropriate alternatives for safeguarding alleged inmate victims. An examination of Restrictive Housing operations and an examination of policy/supporting documentation confirm compliance with this standard.</p>	
<p>115.43 (a)-2</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 20-108: Protective Custody.</p> <p>Internal Management Policy and Procedure 20-106 Administrative Segregation Review Board.</p> <p>General Order 15-103, Restriction Unit.</p> <p>INTERVIEWS:</p> <p>Staff responsible for risk screening.</p> <p>LGBTI Inmates.</p> <p>FINDINGS:</p> <p>Staff interviewed reported the inmate's health and safety are taken into consideration during placement and programming assignments. The audited facility reported one inmate was held in Restrictive Housing in the past 12 months for the purpose of protecting a possible sexual abuse victim. This inmate was in Restrictive Housing for less than 30 days and only until a safe housing assignment could be made. Directives require review every 7 days for any inmate in special housing.</p>	
<p>115.43(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>Internal Management Policy and Procedure 20-108: Protective Custody.</p>	

Internal Management Policy and Procedure 20-106 Administrative Segregation Review Board.

General Order 15-103, Restriction Unit.

**INTERVIEWS:**

Staff responsible for risk screening.

**FINDINGS:**

The audited facility reported zero inmates were held in Restrictive Housing in the past 12 months for longer than 30 days awaiting alternative placement.

115.43 (d)

**INTERVIEWS:**

Staff who supervise Restrictive Housing.

**FINDINGS:**

The audited facility reported one inmate was involuntarily held in Restrictive Housing in the past 12 months awaiting alternative placement. This inmate was in Restrictive Housing for less than 30 days.

115.43(e)

**DIRECTIVE AND DOCUMENT REVIEW:**

The agency reported there have been no PREA related incidents involving the involuntary assignment of any inmate in the past 12 months to Restrictive Housing. The one inmate was placed in Restrictive Housing as a proactive and precautionary measure to ensure the inmate's safety until a safe housing assignment could be made. Agency policy does afford an inmate who is involuntarily assigned to Restrictive Housing to be reviewed every 7 days. The Agency's policy to review the status of inmates in Restrictive Housing every 7 days via the 30-day requirement of this standard, confirms through policy and practice, NCF has exceeded this standard.

**FINDINGS:**

The agency reported there have been no PREA related incidents involving the segregation of any inmate in the past 12 months, therefore there were no case files to review specific to this provision.

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>PREA Inmate Education Brochure (English and Spanish).</p> <p>General Order 15-103, Restriction Unit.</p> <p><b>INTERVIEWS:</b></p> <p>Random Sample of Staff.</p> <p>Random Sample of Inmates.</p> <p><b>ON-SITE REVIEW:</b></p> <p>The Auditor noted PREA Posters, PREA reporting recordings are on the phones, kiosks with tablets are in the housing areas and grievance forms are accessible to the inmates in each housing unit and in common areas.</p> <p><b>FINDINGS:</b></p> <p>A review of documentation indicated that there are multiple ways (including verbally, in writing, privately, from a third-party and anonymously) for inmates and staff to report sexual abuse or sexual harassment.</p> <p>Inmates are informed about the reporting methods through the inmate handbook, postings in the housing units and common areas and as part of the initial orientation process. Inmates also have access to inmate tablet, an electronic system which also offers PREA information. Inmates have access to telephones in each unit that can be used as a reporting outlet. There were numerous posters on display explaining the reporting procedures and how to contact the community-based Options Domestic and Sexual Violence Services. Staff members accept reports made verbally, in writing, anonymously and from third parties and promptly document any form of reporting. Staff members are required to immediately document any allegation. Family and friends of inmates may report sexual abuse/harassment by using the agency website, making a phone call, notifying a community-based organization for victim advocacy or by contacting facility staff. All inmates interviewed confirmed that they were aware of the multiple methods of reporting sexual abuse/harassment allegations.</p> <p>No inmates at the facility are detained solely for civil immigration purposes. Interviews with staff, inmates, observations of posters and other reporting methods and an examination of policy/supporting documentation confirm compliance with this standard.</p> <p>115.51(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>PREA Inmate Education Brochure (English and Spanish).</p> <p>General Order 15-103, Restriction Unit.</p> <p>PREA Posters.</p> <p><b>INTERVIEWS:</b></p> <p>Random Sample of Staff.</p> <p><b>ON-SITE REVIEW:</b></p> <p>During the on-site review, the Auditor noted PREA Posters and phones are accessible to the inmates in each housing unit.</p> <p><b>FINDINGS:</b></p> <p>Staff interviewed reported inmates could make anonymous reports to anyone. Inmates interviewed reported they could call a</p>

family member, write to a Sexual Abuse Advocacy Center, or contact the agency's central office if they needed to contact someone outside of the facility. The inmates reported they were aware they could make reports anonymously.

115.51(c)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Inmate Education Brochure (English and Spanish).

General Order 15-103, Restriction Unit.

INTERVIEWS:

Random Sample of Staff.

Random Sample of Inmates.

FINDINGS:

Staff interviewed reported they would accept reports in writing, anonymously, verbally and through third parties, and that any reports received verbally would be documented immediately. Inmates interviewed reported they could make reports anonymously, in writing, file grievance, verbally, through a family member, or staff member.

115.51(d)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Inmate Education Brochure (English and Spanish).

General Order 15-103, Restriction Unit.

INTERVIEWS:

Inmate who reported sexual abuse during screening.

FINDINGS:

Staff are informed of how to report privately any sexual abuse or harassment. They can verbally discuss sexual abuse/harassment with chain of command/supervisors in a private setting. They can also report in writing, email, memo, etc. Staff are informed of these requirements with required PREA training and employee handbooks. The staff understanding of this process was verified in the interviews.

115.52	Exhaustion of administrative remedies
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.52(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.</p> <p>Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.</p> <p>Grievance Response.</p> <p>INTERVIEWS:</p> <p>Random Sample of Staff and Inmates who report sexual abuse.</p> <p>FINDINGS:</p> <p>In accordance with agency policy, the inmate grievance process meets the requirements of PREA. The process allows the inmate to file an oral or written complaint/grievance at any time about sexual abuse or on any correctional issue. The complaint can be filed with any staff and will be directed to the Warden or designee for response if necessary. Inmates interviewed reported they would go directly to a staff member.</p>
	<p>115.52(b) (f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.</p> <p>Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.</p> <p>Grievance Response.</p> <p>INTERVIEWS:</p> <p>Random Sample of Staff.</p> <p>FINDINGS:</p> <p>Policy states that there is no time frame for filing a grievance relating to sexual abuse or harassment and does not require an inmate to use any informal grievance process before filing an allegation involving sexual abuse/harassment.</p> <p>Allegations of physical abuse by staff are referred to the agency investigators, in accordance with procedures established for such referrals.</p> <p>Policy addresses the filing of emergency administrative remedy requests. If an inmate files the emergency grievance with the institution and believes they are under a substantial risk of imminent sexual abuse, an expedited response is required to be provided within 48 hours. Best efforts are made to provide the Central Office expedited appeal responses within five calendar days. If an inmate reasonably believes the issue is sensitive and the inmate's safety or well-being would be placed in danger, the inmate may submit the grievance directly to the Central Office.</p> <p>There is no prohibition that limits third parties, including other inmates, staff members, family members, attorneys, and outside victim advocates, in assisting inmates in filing requests for grievances relating to allegations of sexual abuse or filing such requests on behalf of inmates. There were zero emergency grievances alleging imminent sexual abuse/harassment filed within the last 12 months.</p>
	<p>115.52(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.</p> <p>Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.</p> <p>Grievance Response.</p>

INTERVIEWS:

Inmates who reported sexual abuse.

FINDINGS:

Staff interviewed reported they would accept reports in writing, anonymously, verbally and through third parties, and that any reports received verbally would be documented immediately.

By policy, the inmate is not required to use an informal grievance process nor refer any grievance to the staff member who is the subject of the complaint.

115.52(d)

DIRECTIVE AND DOCUMENT REVIEW:

Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.

Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.

Grievance Response.

FINDINGS:

In the past 12 months, there has been zero grievances filed that alleged sexual abuse/harassment. Agency directive allows third-party assistance to inmates in the grievance process. If the inmate declines assistance of a third-party, that decision to decline assistance would be documented. No assistance has been requested.

Emergency grievances are permitted in reporting a grievance concerning sexual abuse/harassment. If received, the grievance is immediately addressed.

Agency directive requires that a response to an emergency grievance must be completed within 48 hours and a final decision must be made within five calendar days. Agency disciplines an inmate for filing a grievance related to alleged sexual abuse, only where the agency demonstrates that the inmate filed the grievance in bad faith.

115.52(e)

DIRECTIVE AND DOCUMENT REVIEW:

Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.

Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.

Grievance Response.

FINDINGS:

In the past 12 months, there has been zero grievances filed concerning sexual abuse/harassment. Agency directive allows third-party assistance to inmates in the grievance process. If the inmate declines assistance of a third-party, that decision to decline assistance would be documented.

115.52(g)

DIRECTIVE AND DOCUMENT REVIEW:

Kansas Administrative Regulation (KAR) 44 Article 15 Grievance Procedure for Inmates.

Kansas Administrative Regulations (KAR) 44-15-106. Emergency Procedure.

Grievance Response.

FINDINGS:

Agency Policy does limit any sanctions to an inmate who filed the grievance in bad faith. In the past 12 months, there were zero grievances filed concerning sexual abuse that was found to be in bad faith and resulted in disciplinary action.

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.53(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Memorandum of Understanding (MOU) between Options Domestic &amp; Sexual Violence Services, Inc. and Norton Correctional Facility.</p> <p>INTERVIEWS:</p> <p>Random inmates and inmates who reported a sexual abuse during screening.</p> <p>FINDINGS:</p> <p>The audited facility provides to the inmates, confidential access to outside victim advocates by offering the name of the organization (Options Domestic and Sexual Violence Services, Inc.), toll-free telephone number, posters, and the information is in the inmate handbook.</p> <p>The victim advocate services with Options Domestic and Sexual Violence Services, Inc. includes in-person support services to the victim at no charge to the inmate.</p> <p>115.53(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Memorandum of Understanding (MOU) between Options Domestic &amp; Sexual Violence Services, Inc. and Norton Correctional Facility.</p> <p>INTERVIEWS:</p> <p>Random Sample of Inmates.</p> <p>FINDINGS:</p> <p>Inmates interviewed reported they had never requested support services from outside agencies. Options Domestic and Sexual Violence Services, Inc. informs the inmates of limits to confidentiality prior to receiving services.</p> <p>115.53(c)</p> <p>FINDINGS:</p> <p>SANE/SAFE staff at the local hospital in Hays, KS provides victim advocate services to the inmate population at Norton Correctional Facility while in their care. Inmates are informed as part of their orientation process that all telephone calls, except legal calls, are subject to monitoring and recording and that all mail, except for legal mail, is subject to monitoring as well. Inmates are informed that PREA related communications are not monitored by Norton Correctional Facility. Postings in the housing units and common areas, the PREA brochure issued upon the inmate's arrival and the inmate handbook explains that inmates may confidentially submit written allegations of sexual abuse/harassment to the agency and outside organizations. The facility enables reasonable communication between inmates and these organizations and agency in as confidential a manner as possible.</p> <p>Interviews with staff, inmates, an examination of postings in the housing unit with contact information to outside community-based organizations, and an examination of policy/supporting documentation confirm compliance with this standard.</p>



<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.54(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>FINDINGS:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment provides the ability for staff, an offender’s family, or others to make a report of sexual abuse or sexual harassment by calling one of two toll-free telephone numbers that is published on the KDOC website. The Agency website and posted PREA information, observed by the auditor, assist third-party reporters on how to report allegations of sexual abuse/harassment. Interviews with staff and inmates also confirmed that they were aware that anonymous and third-party reporting procedures were available.</p>

115.61	<p><b>Staff and agency reporting duties</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.61(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>FINDINGS:</p> <p>All staff interviewed reported they would immediately report any knowledge, suspicion, or information regarding any allegation of sexual abuse or sexual harassment.</p> <p>Staff also reported they would report any retaliation against staff or inmates who reported an incident, or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>115.61(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Pre-audit questionnaire.</p> <p>FINDINGS:</p> <p>All staff interviewed reported all staff including medical and mental health staff are required to report all sexual abuse allegations. Medical/Mental Health staff inform the inmate of their duty to report. The facility reports all allegations to the Agency Central Office after being reviewed by the facility's investigators, as applicable. All staff are informed of the importance of confidentially being maintained in the reporting process. No inmate is under the age of 18 at the audited facility.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.62(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Pre-audit questionnaire.</p> <p>FINDINGS:</p> <p>Staff interviewed reported immediate action would be taken if staff were to become aware of any inmate being at substantial risk of imminent sexual abuse. Staff reported any allegation would be taken seriously and due diligence would be followed to ensure staff respond to inmates immediately.</p> <p>Management staff reported the key is creating a safe culture. Randomly selected staff reported in detail the immediate steps they would take to respond to any allegation of an inmate reporting they are at a substantial risk of imminent sexual abuse.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.63(a)
	DIRECTIVE AND DOCUMENT REVIEW:
	Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.
	Pre-audit questionnaire.
	FINDINGS:
	The agency has a policy that requires notification to another facility when they learn of an inmate that had been sexually abused at that other facility. In the past 12 months, the facility reported three allegations of sexual abuse from inmates that occurred at another facility.
	115.63(b) (c)
	DIRECTIVE AND DOCUMENT REVIEW:
	Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.
	FINDINGS:
	Policy requires the reporting of any PREA related allegation by an inmate that occurred at another facility to the Warden (or equivalent person) of the facility where the incident is alleged to have occurred, by the Warden of the facility in which the inmate is currently housed.
	When the inmate reports sexual abuse/harassment from state, privatized facilities, jails, juvenile facilities and federal facilities, the Warden contacts the appropriate office of the facility and/or notifies that agencies Central Office, as appropriate. The notification is to occur as soon as possible, but always within 72 hours of receiving the allegation. Policy also requires that an investigation be initiated.
	115.63(d)
	DIRECTIVE AND DOCUMENT REVIEW:
	Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.
	FINDINGS:
	Staff interviewed reported they would initiate an investigation just like any other. Inmates making allegations at the audited facility regarding incidents from another facility were being investigated through cooperation from both facilities. The same would occur if the inmate made an allegation at a new facility after leaving the audited facility regarding an alleged incident that happened prior to leaving. The facilities would work together to conduct the investigation to include interviews, statements, and evidence collection. All information and evidence would be provided to the facility responsible for completing the investigation, which is the facility that received the complaint. Documentation reviewed shows this process was followed as written in the policies and directives.

<b>115.64</b>	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.64(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention</p> <p>Pre-audit questionnaire.</p> <p>Samples of the PREA First Responder cards.</p> <p>FINDINGS:</p> <p>The practices to this standard were verified by the responses from the staff being questioned in the interview process. All staff are provided training on the first responder actions required in the event of a sexual abuse. This would include any correctional officer that might be a first responder.</p> <p>Agency policy also address the actions required if the responder is not a correctional officer. The non-correctional officer would ensure that the alleged victim not take any action that might destroy physical evidence and then notify a correctional officer/supervisor.</p> <p>Staff interviewed outlined the response taken in response to an allegation. The agency protocol, which meets the standard requirements, was followed.</p> <p>115.64(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention</p> <p>Pre-audit questionnaire.</p> <p>Samples of the PREA First Responder cards.</p> <p>INTERVIEWS:</p> <p>First Responders.</p> <p>FINDINGS:</p> <p>In the past 12 months, there were twenty-eight allegations of sexual abuse or sexual harassment from inmates where correctional officers reported as the first responder and proper evidence collection protocols were taken, as applicable. A review of documentation shows proper notification/evidence collection protocols were taken.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.65(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>Pre-audit questionnaire.</p> <p>FINDINGS:</p> <p>Agency policy requires a coordinated response by correctional staff, supervisory/management staff, medical/mental staff, investigators, and SANE/SAFE services. The document clearly outlines the institutional plan to coordinate actions taken in response to an incident. Staff interviewed reiterated the protocols outlined in the agency's institutional plan.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.66(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Memorandum of Agreement (MOA) between the State of Kansas and the Kansas Organization of State Employees.</p> <p>FINDINGS:</p> <p>The Memorandum of Agreement (MOA) between the State of Kansas and the Kansas Organization of State Employees, directs that the agency is not limited in its ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent discipline is warranted. The agency verified in an agreement entered with the Kansas Organization of State Employees permits the agency to remove alleged staff abusers from contact with any inmate pending an investigation or a determination of whether and to what extent discipline is warranted. Employees can be placed on suspension or administrative leave pending the outcome of an investigation. Based on the auditor's review of documents, it has been determined that the facility and agency meet this standard.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.67(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>FINDINGS:</p> <p>Agency Policy requires the protection of inmates and staff who report sexual abuse/harassment from retaliation. Senior management is assigned to supervise the monitoring and prevention of retaliation.</p> <p>115.67(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>FINDINGS:</p> <p>Staff reported when an investigation is initiated, the individual making the report is told what the expected process will be and if anyone threatens or otherwise makes them feel uncomfortable, they are provided with the name of the person to notify.</p> <p>Staff and inmates are informed that any retaliation will be taken seriously and acted upon. Staff reported the process followed and strategies used when monitoring for potential retaliation against both inmates and staff. Staff is offered emotional support services.</p> <p>115.67(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>FINDINGS:</p> <p>Staff reported in detail what they look for when monitoring for retaliation for both inmates and staff, and the duration of the monitoring, which meet the standard requirements.</p> <p>115.67(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>General Order 08-106, Offender Sexual Abuse Prevention and Intervention.</p> <p>FINDINGS:</p> <p>All required monitoring will be promptly conducted for a minimum of 90 days or longer if needed. The facility would employ a variety of methods such as housing change, removal of abuser, or other means to protect the inmate victim. This directive would also protect anyone who assisted in the investigation. The Agency Policy also requires periodic status checks designed to protect an individual from retaliation.</p> <p>115.67(e)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p>	



General Order 08-106, Offender Sexual Abuse Prevention and Intervention.

FINDINGS:

Staff interviewed reported any type of retaliation is treated seriously and any allegations made would be reviewed and investigated. If an allegation were to be found true, the appropriate necessary actions would be taken.

115.67(f)

DIRECTIVE AND DOCUMENT REVIEW:

The agency is not required to respond to this provision.

FINDINGS:

This provision is not applicable as the agency is not required to respond to this provision.

115.68	<p><b>Post-allegation protective custody</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.68(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 20-108: Protective Custody.</p> <p>General Order 15-103, Restriction Unit.</p> <p>INTERVIEWS:</p> <p>Medical and Mental Health Staff. At the time of the on-site audit, there were no inmates in segregation for risk of sexual victimization/who alleged to have suffered sexual abuse, therefore no inmate was interviewed specific to this provision.</p> <p>ON-SITE REVIEW:</p> <p>During the on-site review, there was no indication that Restrictive Housing is used on a regular basis for PREA related incidents.</p> <p>FINDINGS:</p> <p>Staff interviewed reported protective custody/Restrictive Housing would be used only as a true last resort and efforts would continue to find alternatives during Restrictive Housing assignment.</p> <p>No inmates are placed in Restrictive Housing involuntary without an assessment of all available alternatives.</p> <p>The facility reported no inmates who reported sexual abuse were held in involuntary Restrictive Housing in the past 12 months. Policy also dictates if an involuntary Restrictive Housing assignment is made, the facility affords each inmate a review every 7 days and the inmate programs would continue to the best extent possible.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.71(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Enforcement, Apprehension &amp; Investigations, Investigations (EAI) Protocol Manual.</p> <p>Investigation Records.</p> <p>Training Documentation.</p> <p>FINDINGS:</p> <p>A review of investigative files reflected investigations were conducted promptly, thoroughly, and objectively.</p> <p>Staff interviewed reported investigations are initiated immediately and that third-party and anonymous reports are also considered, documented and the information included in the final report.</p> <p>115.71(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Enforcement, Apprehension &amp; Investigations, Investigations (EAI) Protocol Manual.</p> <p>Investigation Records.</p> <p>Training Documentation.</p> <p>FINDINGS:</p> <p>A review of the investigative staff training documents indicated all investigative staff are trained in the required specialized investigative staff training. Staff interviewed reported receiving the required training.</p> <p>115.71(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Enforcement, Apprehension &amp; Investigations, Investigations (EAI) Protocol Manual.</p> <p>Investigation Records.</p> <p>Training Documentation.</p> <p>FINDINGS:</p> <p>A review of the files reflected the required supporting documentation was maintained in the files. Staff interviewed reported, in detail, the steps to follow in an investigation, information to be collected and documented during an investigation and retained in the files in accordance with this standard.</p> <p>115.71(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p>	

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

INTERVIEWS:

Investigative Staff

FINDINGS:

Staff interviewed reported investigations are not terminated solely because the victim recants the allegation and they would move forward with the investigation.

115.71(e) (h)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

The NCF's investigator may conduct administrative investigations within the facility, when an allegation appears to be criminal in nature, the NCF investigator, who is a sworn Law Enforcement Officer, will convert the administrative investigation into a criminal investigation, as appropriate. If the investigator substantiates the allegation, the case is referred to the local District Attorney's Office for possible prosecution. The credibility of an alleged victim, suspect or witness is assessed on an individual basis and is not determined by the person's status as inmate or staff.

The agency does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth assessment device as a condition for proceeding with the investigation of such an allegation. The review of case files of inmates alleging sexual abuse/harassment revealed that the investigations were completed promptly, thoroughly and in compliance with the PREA standards.

115.71(f)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

Staff interviewed reported all information would be considered, documented, and assessed as part of the investigation. Staff also reported a polygraph is not part of the investigative process.

115.71(g)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

Staff interviewed reported everything is considered as part of the investigation including whether staff actions or failures to act contributed to the abuse.

A review of the investigative files indicated the investigations were thorough. The incident review process, which addresses this provision, was completed.

115.71(i)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

Agency Policy requires written reports be developed and retained per PREA standards, for as long as the alleged abuser is incarcerated or employed by the agency, plus five years and per local/state retention requirements. Should a victim or abuser (staff or inmate) resign or be transferred to another facility, the case will continue to be investigated.

115.71(j)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

Agency Policy address(es) this provision and requires investigation reports will be kept in perpetuity. A review of the investigative files shows compliance with this provision.

115.71(k)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

Staff interviewed reported an investigation would continue regardless of whether the alleged abuser or alleged victim left the facility.

115.71(l)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Enforcement, Apprehension & Investigations, Investigations (EAI) Protocol Manual.

Investigation Records.

Training Documentation.

FINDINGS:

By law and policy, the EAI investigators have authority to investigate criminal activity within the Kansas Department of Corrections and work collaboratively with other law enforcement agencies, as appropriate.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Investigative files.</p> <p>FINDINGS:</p> <p>A review of the investigative files indicated the proper standard was used in determining that the allegations were substantiated/unsubstantiated/unfounded. Staff reported the standard of evidence used to substantiate allegations is the preponderance of the evidence.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.73(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Notice of Investigation Status.</p> <p>FINDINGS:</p> <p>Agency Policy address(es) this provision and requires notification for both sexual abuse and sexual harassment investigations. Staff interviewed reported the inmate would be notified in writing.</p> <p>The agency policy requirements to notify the inmate on the outcome of sexual abuse and sexual harassment investigations meets the standard requirements.</p> <p>115.73(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Notice of Investigation Status.</p> <p>FINDINGS:</p> <p>The agency contacts EAI to conduct criminal investigations on PREA related allegations.</p> <p>115.73(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Notice of Investigation Status.</p> <p>INTERVIEWS:</p> <p>Random Inmates.</p> <p>FINDINGS:</p> <p>Case files reviewed were thoroughly investigated in accordance with PREA protocols and proper action was completed. There was one substantiated allegation against staff during the audit period where staff was removed from all inmate contact.</p> <p>115.73(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103D: Investigation Procedures.</p> <p>Notice of Investigation Status.</p> <p>INTERVIEWS:</p> <p>Random Inmates.</p>	



FINDINGS:

Agency policy requires that the inmate be informed of the outcome of the investigation of all sexual abuse/harassment complaints that the inmate has filed.

For complaints directed towards staff, the inmate would be advised as to staff relocation, no longer employed, whether staff member has been indicted or convicted.

115.73(e)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103D: Investigation Procedures.

Notice of Investigation Status.

FINDINGS:

A review of the investigative directives reflected EAI investigators conduct all criminal investigations.

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.76(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Internal Management Policy and Procedure 02-120D: Employee Disciplinary Procedures and Informal/Formal Actions.</p> <p>FINDINGS:</p> <p>The audited agency has disciplinary sanctions for staff up to and including termination for violating sexual abuse and sexual harassment policies.</p> <p>The facility reported zero cases where an employee was terminated for sexual abuse of an inmate and two cases where staff members were reported to law enforcement for violating sexual abuse or harassment policies.</p> <p>115.76(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Internal Management Policy and Procedure 02-120D: Employee Disciplinary Procedures and Informal/Formal Actions.</p> <p>FINDINGS:</p> <p>Two staff members were criminally investigated for possible PREA violations.</p> <p>115.76(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>The agency reported zero staff members have been disciplined for violation of agency sexual abuse or sexual harassment policies in the past 12 months.</p> <p>FINDINGS:</p> <p>Two staff members were criminally investigated for possible PREA violations or violations of agency sexual abuse or sexual harassment policies in the past 12 months.</p> <p>115.76(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Internal Management Policy and Procedure 02-120D: Employee Disciplinary Procedures and Informal/Formal Actions.</p> <p>FINDINGS:</p> <p>Two staff members were criminally investigated for possible PREA violations or violations of agency sexual abuse or sexual harassment policies in the past 12 month.</p>

<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.77(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Internal Management Policy and Procedure 02-106D: Denial of Entry for Contract Personnel.</p> <p>Internal Management Policy and Procedure 13-101D: Volunteering.</p> <p>FINDINGS:</p> <p>The agency reported there had been one contractor and no volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates in the past 12 months, The criminal investigation is ongoing. All documentation is in compliance with this standard and the contractor is no longer employed at NCF.</p> <p>115.77(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 02-118D: Employee and Volunteer Rules of Conduct and Undue Familiarity.</p> <p>Internal Management Policy and Procedure 02-106D: Denial of Entry for Contract Personnel.</p> <p>Internal Management Policy and Procedure 13-101D: Volunteering.</p> <p>INTERVIEWS:</p> <p>Random Staff</p> <p>FINDINGS:</p> <p>The agency reported there had been one contractor and no volunteers reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of inmates in the past 12 months, the criminal investigation is ongoing. All documentation is in compliance with this standard and the contractor is no longer employed at NCF. Staff interviewed reported any allegations of sexual abuse of inmates by contractors or volunteers would be treated the same as if they were regular staff.</p> <p>Agency personnel with the need-to-know would be notified, who would then contact the contractor's point of contact and cease the contract with the contractor. Both volunteers and contractors would be prohibited from having further contact with inmates in substantiated cases.</p>

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>115.78(a) (b)(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103: Investigation Procedure.</p> <p>Inmate Handbook.</p> <p>PREA Inmate Education Brochure (English and Spanish).</p> <p>Offender's Guide to Sexual Assault Prevention Brochure (English and Spanish).</p> <p>FINDINGS:</p> <p>The Agency Policy defines sexual assault of any person, involving non-consensual touching by force or threat of force, as the greatest severity level prohibited act.</p> <p>The policy identifies inmates engaging in sexual acts and making sexual proposals or threats to another as a high severity level prohibited act. Consensual sex or sexual harassment of any nature is prohibited and will result in discipline. Consensual sex between inmates does not constitute sexual abuse.</p> <p>Sanctions are commensurate with the nature and circumstances of the abuse committed, along with the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories. Inmates are subject to disciplinary sanctions pursuant to the formal disciplinary process defined in the Agency's Policy.</p> <p>Norton Correctional Facility does not discipline inmates who make an allegation in good faith, even if an investigation does not establish evidence sufficient to substantiate the allegation. Interviews with the investigator confirmed compliance with this standard.</p> <p>The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the inmate's behavior when determining what type of sanction, if any, should be imposed. If mental disabilities or mental illness is a factor, Norton Correctional Facility considers the offer of therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse.</p> <p>115.78(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Internal Management Policy and Procedure 22-103: Investigation Procedure.</p> <p>Inmate Handbook.</p> <p>PREA Inmate Education Brochure (English and Spanish).</p> <p>Offender's Guide to Sexual Assault Prevention Brochure (English and Spanish).</p> <p>INTERVIEWS:</p> <p>Medical and Mental Health Staff</p> <p>FINDINGS:</p> <p>Staff interviewed reported the offending inmate is offered therapy, counseling, or other intervention services, but would not require the inmate's participation as a condition of access to any rewards-based behavior management system or programming or education.</p> <p>115.78(e)(f)(g)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p>	

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Internal Management Policy and Procedure 22-103: Investigation Procedure.

Inmate Handbook.

PREA Inmate Education Brochure (English and Spanish).

Offender's Guide to Sexual Assault Prevention Brochure (English and Spanish).

**FINDINGS:**

The agency reported there was zero reported incidents involving sexual contact of inmates with staff with a finding of guilt, therefore there was no documentation to review specific to this provision.

<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.81(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>INTERVIEWS:</p> <p>Inmates who Disclosed Sexual Victimization at Risk Screening.</p> <p>Staff Responsible for Risk Screening.</p> <p>FINDINGS:</p> <p>A review of the forms used by the agency demonstrate how the intake screening staff, medical and mental health staff document the follow-up services to inmates with prior sexual victimization disclosed during the screening process. Staff interviewed reported they work with the medical and mental health professionals by notifying them immediately which generates a referral. Inmates interviewed reported being referred to medical and mental health staff for follow-up. A review of the inmate files reflected the inmates did receive a follow-up meeting with medical and mental health practitioners as required.</p>
	<p>115.81(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>INTERVIEWS:</p> <p>Staff Responsible for Risk Screening.</p> <p>FINDINGS:</p> <p>Staff interviewed reported inmates are referred to mental health staff for follow-up. A review of a randomly selected inmate files reflected the inmates did receive a follow-up meeting with a mental health practitioner as required.</p>
	<p>115.81(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>ON-SITE REVIEW/FINDINGS:</p> <p>During the on-site review, the Auditor noted medical and mental health staff have designated space where staff can privately meet with inmates. Medical and Mental Health records are maintained separately and shared according to directive.</p> <p>115.81(d)</p>

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-139D: Screening for Sexual Victimization and Abusiveness.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

INTERVIEWS:

Medical and Mental Health Staff

FINDINGS:

Staff interviewed reported they use the consent form for inmates over 18 years of age.

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>



115.82(a)

DIRECTIVE AND DOCUMENT REVIEW:

General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

INTERVIEWS:

Medical and Mental Health Staff

Inmates who reported a sexual abuse.

FINDINGS:

Staff interviewed reported inmates would be provided emergency medical treatment immediately and that the nature and scope of the services are determined according to their professional judgment.

115.82(b)

DIRECTIVE AND DOCUMENT REVIEW:

General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

INTERVIEWS:

First Responders.

FINDINGS:

Agency Policy requires staff to notify mental health staff if they believe an inmate is actively experiencing a mental health crisis. Staff who were interviewed reported protective measures were taken for the alleged victim, and the victim was referred for counseling.

115.82(c) (d)

DIRECTIVE AND DOCUMENT REVIEW:

General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

INTERVIEWS:

Medical and Mental Health Staff

FINDINGS:

Staff interviewed reported the required information and services would be provided immediately and unimpeded.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.83(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Statue (KAR) 44-5-115, Service Fees.</p> <p>ON-SITE REVIEW/FINDINGS:</p> <p>During the on-site review, the Auditor observed the Health Services Department at the facility. Medical services are available 24/7 at the facility or at the nearest available hospital, if needed. Mental health professionals provide treatment and counseling to inmates both in-person and through video conferencing.</p>
	<p>115.83(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Statue (KAR) 44-5-115, Service Fees.</p> <p>INTERVIEWS:</p> <p>Medical Staff.</p> <p>FINDINGS:</p> <p>Staff interviewed reported follow-up services would be matched with appropriate intervention services.</p>
	<p>115.83(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>Kansas Statue (KAR) 44-5-115, Service Fees.</p> <p>INTERVIEWS:</p> <p>Medical and Mental Health Staff.</p> <p>FINDINGS:</p> <p>Staff interviewed reported the services provided meet or exceeds the community level of care.</p>
	<p>115.83(d) (e)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.</p> <p>General Health Services Policy and Procedure, Response to Sexual Abuse.</p>

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

FINDINGS:

This is an all-male facility; these provisions do not apply to NCF.

115.83(f)

DIRECTIVE AND DOCUMENT REVIEW:

General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

INTERVIEWS:

Inmates.

FINDINGS:

At the time of the on-site audit, there were no inmates who reported a sexual abuse allegation at this facility who required medical services, therefore no inmate was interviewed specific to this provision. All appropriate medical care would be provided at no cost to the inmate.

115.83(h)

DIRECTIVE AND DOCUMENT REVIEW:

General Health Services Policy and Procedure, Federal Sexual Assault Reporting Regulations.

General Health Services Policy and Procedure, Response to Sexual Abuse.

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

Kansas Statue (KAR) 44-5-115, Service Fees.

INTERVIEWS:

Medical and Mental Health Staff.

FINDINGS:

Staff interviewed reported the inmate would be referred, and the treatment provider would respond immediately.

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.86(a)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 12-118: Serious Incident Review Board Actions Pending and Subsequent to Incident Reviews, Sexual Incident Review.</p> <p>PREA Application Manual.</p> <p>Investigative files.</p> <p><b>FINDINGS:</b></p> <p>A review of the investigative files reflected the facility had completed a sexual abuse incident review at the end of previous investigations, there were two reports of administrative and/or criminal investigations of alleged sexual abuse completed within the past 12 months, excluding investigations that were unfounded.</p> <p>115.86(b)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 12-118: Serious Incident Review Board Actions Pending and Subsequent to Incident Reviews, Sexual Incident Review.</p> <p>PREA Application Manual.</p> <p>Investigative files.</p> <p><b>FINDINGS:</b></p> <p>A review of the investigative files reflected the facility has completed a sexual abuse incident review on the eight allegations, as required.</p> <p>115.86(c)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Agency Directives and BOP PREA Plan.</p> <p><b>FINDINGS:</b></p> <p>The Incident Review Team consists of the Warden, Deputy Warden, PREA Compliance Manager, the HSA, Behavioral Health Staff, EAI, Classifications Administrator and Major. The incident review is conducted within 30 days of the conclusion of the investigation and consideration is given as to whether the incident was motivated by race, ethnicity, gender identity, physical barriers and status or gang affiliation. The team also decides as to whether additional monitoring technology or staffing/monitoring procedures should be added to enhance inmate supervision. The facility implements the recommendations for improvement or documents its reasons for not doing so. All required reviews by the team were completed within 30 days of the conclusion of all investigations and are thoroughly documented.</p> <p>115.86(d)</p> <p><b>DIRECTIVE AND DOCUMENT REVIEW:</b></p> <p>Internal Management Policy and Procedure 12-118: Serious Incident Review Board Actions Pending and Subsequent to Incident Reviews, Sexual Incident Review.</p> <p>PREA Application Manual.</p> <p><b>FINDINGS:</b></p> <p>Staff interviewed referenced all the elements needing to be considered, examined, and assessed. The Incident Review</p>	

Team member provided detailed information of all the elements addressed by the team. Staff interviewed acknowledged a report is completed and includes any recommendations for improvement.

115.86(e)

**DIRECTIVE AND DOCUMENT REVIEW:**

Internal Management Policy and Procedure 12-118: Serious Incident Review Board Actions Pending and Subsequent to Incident Reviews, Sexual Incident Review.

PREA Application Manual.

**FINDINGS:**

Agency Policy and NCF procedures are in compliance with this provision.

115.87	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

115.87(a and c)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Application Manual.

FINDINGS:

As confirmed by a review of documents, Norton Correctional Facility collects accurate, uniform data for every allegation of sexual abuse/ harassment by using a standardized instrument. The agency tracks information concerning sexual abuse using data from the investigation case log. For every allegation of sexual abuse or sexual harassment, all documents and items used to demonstrate a complete and proper response is loaded into the electronic investigation file. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the Department of Justice. The Agency Policy requires the PREA Coordinator (PC) to review the facility submissions annually to ensure compliance with PREA standards and to improve the effectiveness of the sexual abuse prevention and intervention program.

The agency aggregates and reviews all data annually. Upon request, the agency would provide all such data from the previous calendar year to the Department of Justice no later than June 30.

115.87(b)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Application Manual.

FINDINGS:

A review of the facility tracking information reflected a comprehensive system designed to maintain various elements for the required data for sexual abuse and sexual harassment allegations.

115.87(d)

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Application Manual.

FINDINGS:

A review of the agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment allegations.

115.87(e)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Application Manual.

FINDINGS:

Based on the auditor's review of the policy and documents it has been determined the agency meets this standard.

115.87(f)

DIRECTIVE AND DOCUMENT REVIEW:

Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

PREA Application Manual.

FINDINGS:

Based on the auditor's review of the policy and documents it has been determined the agency meets this standard.

<b>115.88</b>	<b>Data review for corrective action</b>
<b>Auditor Overall Determination:</b> Meets Standard	
<b>Auditor Discussion</b>	
<p>115.88(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC 2019 Annual PREA Report.</p> <p>KDOC 2020 Annual PREA Report.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data form.</p> <p>KDOC Annual Report.</p> <p>FINDINGS:</p> <p>A review of the annual reports reflects all the elements required by this provision. Staff interviewed reported in detail the process followed when reviewing the data, identifying problem areas and corrective action, and preparing the annual report.</p> <p>115.88(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC 2019 Annual PREA Report.</p> <p>KDOC 2020 Annual PREA Report.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data form.</p> <p>KDOC Annual Report.</p> <p>FINDINGS:</p> <p>Agency Annual PREA Reports were reviewed and found to provide a comparison of the current year's data and corrective actions with those from prior years. The reports provided an assessment of the agency's progress in addressing sexual abuse.</p> <p>115.88(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC 2019 Annual PREA Report.</p> <p>KDOC 2020 Annual PREA Report.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data.</p> <p>KDOC Annual Report.</p> <p>FINDINGS:</p> <p>The Agency and NCF reviews and assesses all sexual abuse/sexual harassment data at least annually to improve the effectiveness of its sexual abuse prevention, detection, and response policies, to identify any trends, issues, or problematic areas and to take corrective action if needed. The PREA Compliance Manager forwards data to the respective PREA Coordinator. An Annual Report is prepared and placed on the BOP website. The Annual Report was reviewed by the auditor. The report can be found at the following website address: <a href="http://www.doc.ks.gov/facilities/prea">http://www.doc.ks.gov/facilities/prea</a>.</p> <p>115.88(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p>	



Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.

KDOC 2019 Annual PREA Report.

KDOC 2020 Annual PREA Report.

KDOC Annual PREA Report, A Comparative Analysis of PREA Data.

KDOC Annual Report.

FINDINGS:

Staff interviewed reported all personal identifying information and personal health information is redacted. The reports would reflect only basic demographic information.

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.89(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC Annual PREA Reports.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data.</p> <p>KDOC Annual Report.</p> <p>KDOC Website.</p> <p>FINDINGS:</p> <p>The PREA Coordinator reviews data compiled by each facility and issues a report on an annual basis. Facility data is maintained in locked files or on computer databases that are user ID and password protected. Agency PREA data is securely retained and is published on the KDOC website after removing all personal identifying information.</p> <p>115.89(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC Annual PREA Reports.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data.</p> <p>KDOC Annual Report.</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The data posted on the agency website includes agency data from the previous years.</p> <p>115.89(c)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Internal Management Policy and Procedure 10-103D: Coordinated Response to Sexual Abuse and Harassment.</p> <p>KDOC Annual PREA Reports.</p> <p>KDOC Annual PREA Report, A Comparative Analysis of PREA Data.</p> <p>KDOC Annual Report.</p> <p>Aggregated data on agency website.</p> <p>FINDINGS:</p> <p>The data posted on the agency website has all personal identifiers removed.</p> <p>115.89(d)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on agency website.</p> <p>FINDINGS:</p> <p>The data and records collected are to be retained in accordance with agency retention requirements.</p>

115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.401(a)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The agency ensured that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once.</p> <p>115.401(b)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>Aggregated data on website.</p> <p>FINDINGS:</p> <p>The agency is following their audit cycle and planned future audits. The data posted on the agency website.</p> <p>115.401(h) (i)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>The Auditor had full access to, and the ability to observe, all available areas of the facility. The Auditor reviewed areas of this facility multiple times in person, by photographs and/or via security cameras during the on-site review.</p> <p>The Auditor was permitted to request and did receive copies of any relevant documents needed for this audit.</p> <p>115.401(m)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>The Auditor was permitted to conduct private interviews with inmates. The staff at this facility were very professional and efficient with regards to this provision.</p> <p>115.401(n)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>Inmates were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel. The Auditor did not receive confidential and unimpeded letters from inmates residing at this facility.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.403(f)</p> <p>DIRECTIVE AND DOCUMENT REVIEW:</p> <p>There is no agency directive for this provision.</p> <p>FINDINGS:</p> <p>KDOC has published on its agency website all Final Audit Reports within 90 days of issuance by the Auditor. This information is made available to the public and is in accordance with 28 C.F.R. § 115.405.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes



115.16 (a)	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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



<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

<b>115.42 (d)</b>	<b>Use of screening information</b>	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
<b>115.43 (d)</b>	<b>Protective Custody</b>	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e)</b>	<b>Protective Custody</b>	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
<b>115.51 (a)</b>	<b>Inmate reporting</b>	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

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

<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, 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.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes



<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes



<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes