

PREA Facility Audit Report: Final

Name of Facility: Hennepin County Adult Corrections Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 07/09/2021

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"/>
Auditor Full Name as Signed: Adam T Barnett	Date of Signature: 07/09/2021

AUDITOR INFORMATION	
Auditor name:	Barnett, Adam
Email:	adam30906@gmail.com
Start Date of On-Site Audit:	06/03/2021
End Date of On-Site Audit:	06/05/2021

FACILITY INFORMATION	
Facility name:	Hennepin County Adult Corrections Facility
Facility physical address:	1145 - 1355 Shenandoah Lane, Plymouth, Minnesota - 55447
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Veronica Briden
Email Address:	veronica.briden@hennepin.us
Telephone Number:	507-380-5083

Warden/Jail Administrator/Sheriff/Director	
Name:	Sean Chapman
Email Address:	Sean.Chapman@hennepin.us
Telephone Number:	612-596-0007

Facility PREA Compliance Manager	
Name:	Erica Johnson
Email Address:	erica.johnson@hennepin.us
Telephone Number:	O: (612) 596-0064

Facility Health Service Administrator On-site	
Name:	Heidi Ewing
Email Address:	hewing@TeamCenturion.com
Telephone Number:	612-596-0126

Facility Characteristics	
Designed facility capacity:	477
Current population of facility:	108
Average daily population for the past 12 months:	135
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	25-34
Facility security levels/inmate custody levels:	Minimum and Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	160
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	3
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Hennepin County Department of Community Corrections and Rehabilitation
Governing authority or parent agency (if applicable):	
Physical Address:	300 South Sixth Street, Minneapolis, Minnesota - 55415
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Veronica Briden	Email Address:	veronica.briden@hennepin.us

AUDIT FINDINGS

Narrative:

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

Methodology:

The PREA audit of Hennepin County Adult Correctional Facility (ACF) was conducted 6/3/21 thru 6/5/21. The Hennepin County Department of Community Corrections and Rehabilitation operates the Adult Correctional Facility (ACF). The Adult Correctional Facility (ACF) hereinafter maybe referred to as facility.

The auditor uses a triangular approach, by connecting the PREA audit documentations, on-site observation, tour, facility practice, interviewed staff and Residents, local and national advocates, etc. to make determinations for each standard. Each standard and/or provision are designed with documentation reviewed, online PREA Audit: Pre-Audit Questionnaire, overall findings, and interview results.

The auditor uses a triangular approach, by connecting the PREA audit documentation, on-site observation, site review of the entire facility and complex, determination of facility practice, interviewed staff and residents, local and national advocates, etc. to make determinations for each standard. Each standard and/or provision is with documentation reviewed, online PREA Audit: Pre-Audit Questionnaire, overall findings, and interview results.

The auditor is using the stylistic rules for the Field Training Program (FTP) Auditor Trainee Report Writing Reference Manual as best practices.

Site Review Location:

The site review for this audit took place at Adult Correctional Facility (ACF) located at 1145 Shenandoah Lane, Plymouth Minnesota, 55447. The auditor conducted pre-audit work prior to arrival at the facility.

Pre-Audit Preparation:

Agency/Facility House Residents For:

- Hennepin County Department of Community Corrections and Rehabilitation.

Audit Notice Posting:

During the pre-audit period, the facility received instructions to post the required PREA audit notice of the upcoming audit prior to the on-site visit for confidential communications on 3/12/21. The facility posted the notices in English and Spanish. The auditor received email, pictures confirming the posted notices and observed the posted notices on-site.

As of 5/31/21, there were no communications from Residents or staff.

Online Pre-Audit Questionnaire (PAQ):

In order to prepare for the audit process, emails correspondence occurred with the agency PREA coordinator. The online Pre-Audit Questionnaire was completed and sent to the auditor as required. As a part of the on-site visit, the auditor requested that the agency PREA coordinator review the Pre-Audit Questionnaire to reflect updated information.

The auditor completed a documentation review using the Pre-Audit Questionnaire, website review, policies and procedures from the agency headquarters, facility, and additional documentation provided. Phone conversations and email exchanges occurred with the agency PREA coordinator.

The following documentation was requested for on-site visit:

- Residents' roster (100%)
- Youthful Resident' roster (100%), if any
- Notice of Auditor Post Time Stamp (English & Spanish)
- List of Residents with disabilities
- List of Residents who are Limited English Proficient (LEP)
- List of LGBTI Residents (100%)
- List of Residents in segregated housing (PREA related), If any
- List of Residents who reported sexual abuse
- List Residents who reported sexual victimization during risk screening

- Staff roster (100%)
- List of specialized staff
- Staff personnel (documentation)
- Resident documentations
- Contractors who have contact with Residents (if any)
- Volunteers who have contact with Residents (if any)
- PREA screening to be taken with the auditor
- PREA reassessments, to be taken with the auditor
- Allegations of sexual abuse and sexual harassment reported for investigation in the 12 months (100%) to be taken with the auditor
- All hotline call made during the 12 months
- A summary of all incidents within the past 12 months (log)
- Unannounced rounds documentation to be taken with the auditor

Additional pre-audit information requested prior to the visit was obtained.

Website Reviews:

Prior to the onsite portion of the audit, the auditor conducted a website review of the facility/agency. The reviewed content included but not limited to:

- Prison Rape Elimination Act
- Report and Incident
- Current PREA Report
- DOCCR's 2019 PREA Report
- Past PREA Reports
- Audit Compliance Reports
- Additional Resources
- DOCCR Fact Report
- Volunteer with Corrections and Public Safety
- Application Process for Becoming a Volunteer
- Volunteer Background Check Information
- Visiting Schedule and Rules
- Mail
- Phone Calls
- Community Corrections Act 2020-2021 Comprehensive Plan
- Parent and Resident Grievance

Agency/Facility Policies Reviewed

- DOCCR Administration Policy: Criminal Records Check
- DOCCR Administration Policy: Office of Administrative Services, Incident Referrals
- DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse
- DOCCR Administration Policy: PREA, Resident Receiving and Orientation, Institutions
- DOCCR Administration Policy: PREA, Sexual Abuse Data Collection and Review
- DOCCR Administration Policy: PREA, Staffing Patterns and Resident Supervision
- DOCCR Administration Policy: Prison Rape Elimination Act (PREA)
- DOCCR Administration Policy: Professional Standards and Conduct Investigations
- DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse
- DOCCR Administration Procedures: PREA, Resident Receiving and Orientation, Institutions
- DOCCR Administration Procedures: PREA, Sexual Abuse Data Collection and Review
- DOCCR Administration Procedures: PREA, Staffing Patterns and Resident Supervision
- DOCCR Administration Procedures: Prison Rape Elimination Act (PREA)
- DOCCR Administration: Office of Administration Services, Incident Referrals
- DOCCR Administration: Professional Standard and Conduct Investigations
- DOCCR Human Resources, 16., General Rules of Conduct
- DOCCR Human Resources, 16.2 Violations and Penalties
- DOCCR Policy, Prison Rape Elimination Act
- DOCCR Policy, Professional Standards and Conduct Investigations
- Hennepin County Sheriff's Office PREA Policy 904
- Policy, 06-03, Supervision Juveniles
- PREA Definitions
- Professional Standard and Conduct Policy, Incident Intake and Triage Policy
- PSC Incident Intake and Triage Policy
- PSC Investigations Policy

On-Site Audit Phase:

Entrance Conference:

On 6/3/21, the on-site audit started with meeting the superintendent, facility PREA compliance manager and the agency PREA coordinator. The entrance conference was held and attended by:

- Adam Barnett, USDOJ Certified PREA Auditor
- Veronica Briden, Agency PREA Coordinator
- Sean Chapman, Superintendent
- Coldly Harris, Assistant Superintendent
- Erica Johnson, CFS/Facility PREA Compliance Manager
- Joshua Schwartz, Training

Welcome was given by the agency PREA coordinator, superintendent, facility PREA compliance manager. The auditor introduced himself and provided a brief description of his experiences, qualifications, correctional and auditing background. The auditor explain that an associate is working with him regarding this audit.

The associate is Robert Lanier, President of Diversity Correctional Services, LLC.

As associate:

- Discussed agency and facility documentation.
- Assist with administrative/prep work

The auditor provided an overview of the expectations during the onsite audit and transparency to discuss any identified issues or concerns. The auditor established a process to make corrections on site and if necessary, post onsite follow ups.

The audit agenda was reviewed and discussed, to include Resident population based on 1st day of the on-site audit and the 2nd and 3rd day planned activities.

The auditor requested an updated list of all staff work scheduled the on-site visit, sorted by shift. The facility operates on eight-hour shift (three shifts). The auditor provided the facility with a list of random and specialized staff and random and target Residents who would be interviewed.

Site Review/Tour:

On the first day of the audit after the entrance conference, the auditor conducted a comprehensive toured of the facility. It was requested that when the audit paused to speak to a resident or staff, that staff on the tour to please step away so the conversation might remain private. This request was well respected.

The facility is composed of an adult male unit housed in one building and the female unit housed in a separate unit located down the road from the adult male facility. The facility is an older facility constructed in a linear design. Housing units consists of cells containing commodes. Residents are afforded privacy whole showering through the use of shower curtains. In the male unit there are approximately 250 cameras plus supplementing staff supervision and enhancing monitoring of Residents.

The kitchen area is equipped with cameras and a monitor in the food service office. Offices and spaces in the unit have windows that facilitate viewing. There are cameras in the storage area and loading docks. In the dining area are multiple KIOSKS and twenty (20) phones.

The library area is also designed to enable viewing through windows and cameras.

The gym is equipped with cameras as well.

The intake area has two showers. Both have ½ doors providing privacy during the intake showers. The property room is equipped with camera coverage.

The medical area is staff 24/7 and cameras cover the lobby area and in the unit. Windows in doors facilitate viewing.

A segregation unit contains 10 single occupancy cells. There are multiple cameras in the area and showers have half doors providing resident's privacy while showering.

The female units have been described earlier. Residents can shower with privacy. Cameras were observed throughout the facility supplementing staff supervision. Cameras were observed in corridors.

The library area was a wide-open area located in the main lobby. Classes had cameras and windows enabling viewing from the outside halls. There are cameras in the dining area. Meals are prepared in the male unit and brought to the female unit for serving.

The auditor was provided unimpeded access to all parts of the facility. While inspecting the facility, doors and offices were checked consistently to ensure they are secured and locked. The auditor observed the location of staff, including the posting of notices of PREA audits, PREA related posters, locations of showers and privacy issues, if any, grievances and medical lock boxes, request forms, configuration of living units, capacities of dorms, observations of blind spots, camera deployment, the use of mirrors to mitigate blind spots, staffing levels, supervision of Residents, accessibility to telephones and instructions for using the phones to report sexual abuse. Notices of PREA audit in English and Spanish were observed posted in the facility, accessible to detainees, staff, visitors, contractors, and volunteers.

The auditor did observe announcements of female staff entering the living areas. The auditor had opportunities to view Resident and staff interaction. There was also ample time to observe the nature and quality of Resident supervision throughout the on-site audit process, and in all instances the auditor observed appropriate respect on the part of both Residents and staff.

The following staff accompanied the auditor on tour and responded to the auditor's questions concerning the facility operations:

- Adam Barnett, USDOJ Certified PREA Auditor
- Veronica Briden, Agency PREA Coordinator
- Sean Chapman, Superintendent
- Erica Johnson, CFS/Facility PREA Compliance Manager
- Joshua Schwartz, Training

Staff Interviewed:

The auditor conducted interviews with the following agency leadership staff, and are counted in the totals. Below are the staff interviewed previously, either written, by the lead auditor, associate, on-site, and by telephone:

Agency Central Office Staff (4):

- Agency Head
- Agency PREA Coordinator
- Investigator (Agency)
- Agency Contract Administrator

On the first day of the audit the facility reported 114 staff to include 4 part-time and 54 contractors.

The auditor conducted the following staff interviews on-site or via phone.

Specialized Staff (12) included the following:

- Division Director/Facility PREA Compliance Manager – 1
- Incident Review Team – 1
- Intermediate or Higher-Level Staff Unannounced Rounds – 1
- Medical Staff – 1
- Mental Health Staff - 1
- Administrative Human Resources Staff – 1
- Staff Conducting Victim/Aggressor Assessments – 1
- Retaliation Monitor – 1
- Intake Staff – 1
- Contractor with Resident Contact – 1
- First Responder Non-Security Staff – 1
- First Responder Security Staff – 1

Randomly Selected Staff (14), Even (11) from Male Section and three (3) from Female Section:

The auditor requested and was provided a direct care staff roster with all shifts.

Interviews with random and specialized staff confirmed that the facility's staff understood the agency's position regarding the Prison Rape Elimination Act (PREA). Random and specialized staff were all knowledgeable about their roles in the prevention, reporting, and detection of sexual abuse and sexual harassment, and their responsibilities in the event of a PREA related incident, particularly as a first responder.

Residents Interviewed:

On the first day of the audit, the facility's designated capacity for males is 399 and females are 78, totaling 478. The number of Residents housed during the first day of the audit in the male section was 75 and the female section was 14, totaling 89. The auditor conducted the following Resident interviews during the on-site phase of the audit:

Randomly Selected Residents (10), one (1) female and nine (9) males:

The auditor requested and was provided a roster of Residents listed by living units.

Informally Interviewed Residents Interviewed during facility site review (8).

Targeted Residents (6), two (2) males and four (4) females:

- Physical Disability (2) one male and one female
- Resident who Identifies as Lesbian (2)
- Resident who Identifies as Gay (1) (Resident refused to interview)
- Resident who Reported Sexual Abuse (2) one male and one female

All Residents that were formally interviewed were asked the random interview questions provided by the National PREA Resource Center. Fourteen (14) Residents were formally interviewed and eight (8) Residents were informally interviewed.

Residents were respectful and cooperative with auditor. All Residents wore masks and maintained social distancing practices during the formal interviews. The Resident's uniforms were clean, and their hygiene satisfactory.

Interviews with Residents revealed that they understand PREA safeguards and the facility's zero-tolerance policy. Comprehensive Resident PREA education is provided in written form during Resident orientation/intake, and through the handbook, and posters.

Advocacy Organizations:

The PREA auditor's manual, pages 37 and 38, requires the auditor to conduct outreach to relevant national and local advocacy organizations and to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility. The following national advocacy, State, and/or community advocacy organizations were contacted.

- Just Detention International (JDI) – is a health and human rights organization that seeks to end sexual abuse in all forms of detention. Founded in 1980, JDI is the only organization in the U.S. – and the world – dedicated exclusively to ending sexual abuse behind bars. They hold government officials accountable for prisoner rape; challenge the attitudes and misperception that enable sexual abuse to flourish; and make sure that survivors get the help they need.

Contact: Just Detention International (JDI) / Wilshire Blvd., Suite 340 Los Angeles, CA 90010 / Email sent: 5/11/21 at 9:25 pm. Received response on 5/11/21, a review on the database indicates that they have not received any information regarding this facility.

- National Sexual Violence Resource Center (NSVRC) – is the leading nonprofit in providing information and tools to prevent and respond to sexual violence. NSVRC translates research and trends into best practices that help individuals, communities and service providers achieve real and lasting change. NSVRC also work with the media to promote informed reporting.

Contact: National Sexual Violence Resources Center (NSVRC) /2101 N. Front Street Governor's Plaza North, building #2 Harrisburg, PA 17110 / Email sent: 5/11/21 at 9:30 pm. As of 6/2/21 no response.

- Sexual Violence Center (SVC) – provides direct services. All services are free and confidential and the organization work with people of all genders, age 12 and up. Services provided are, 24-Hours Advocacy; 24-Hour Crisis Hotline; Short-term 1:1 Counseling; Support Groups and Legal Advocacy and Clinics.

Contact: Sexual Violence (SVC) / 2021 E. Hennepin Ave. Suite 415, Minneapolis, MN 55413 / Email sent: 5/11/21 at 9:40 am. Response received 5/2021.

The auditor requested the following information from the local and/or national advocacy organizations:

- How many SAFE or SANE referrals did the organization received in the last 12 months?
- Can the Residents remain anonymous, upon request, when making a report?
- Whom do the organization notify at the facility regarding reports?
- How many reports have the organization received in the past 12 months for advocacy services?
- How many Residents reported sexual abuse and/or sexual harassment?
- Who is your contract at the facility?
- Is there any additional information you would like to share regrading this facility?

Documentation Reviewed:

- PREA Investigative Summaries
- PREA Disposition Offender Notifications
- Sexual Allegation Response Checklist
- Incident Reports
- Grievance (PREA Related)
- Witness Statements
- Staff Plan - 2020
- Documentation of Unannounced Rounds

- Staff PREA Training Certificates
- Staff PREA Acknowledgement Statements
- Certificate's documenting Effectively with LGBTI Offenders
- Contractors PREA Training Acknowledgement Statements
- Resident Orientation
- PREA investigators Training
- Medical/mental health staff (contractors)
- Victim/Aggressor Initial Screenings
- Victim/Aggressor Re-Assessments (Match with PREA Initial Screenings)
- Contractors Background Check Clearance
- Contractors Five Year Background Clearance
- Staff Five Year Background Check Clearance
- Applicant Verifications/ Three PREA Questions

Incident Reporting:

The facility maintains a comprehensive incident reporting system that is monitored on an ongoing basis for immediate corrective action, as well as trending on an annual basis for the purpose of quality improvement to minimize risk and staff training needs.

Disciplinary Procedures:

The purpose of the Resident disciplinary system is to provide all Residents with a fair and impartial hearing when they are accused of violating an agency or institutional rule. This system is also designed to promote order and maintain the security and safety of the institution.

Informational Consolidation:

The auditor communicated with the agency PREA coordinator frequently throughout the two days of the on-site audit to consolidate information and ensure that the interviews, documentation, and facility observations supported compliance determinations for the required PREA standard. There was work on-site and off-site at the hotel to review concerns and documents. When additional information was requested to establish compliance, the facility management team was responsive and made every effort to deliver documentation, explanations, or clarifications. The facility staff was receptive to addressing identified areas of concern during the facility site visit and during the post audit phase of the audit regarding noted concerns.

Exit Conference:

The auditor conducted an exit meeting on 6/5/2012 during which preliminary findings of the review were discussed with the facility and agency leadership team. The attendees, in addition to the state agency staff, participated in the exit briefing. During the exit, the auditor provided a verbal list of identified non-compliant items and described how these related to the standards and or provisions. For resolution of issues following the exit, the auditor advised that outstanding issues must be addressed with proof of compliance and practice.

The following staff attended the exit conference.

- Adam Barnett, USDOJ Certified PREA Auditor
- Veronica Briden, Agency PREA Coordinator
- Sean Chapman, Superintendent
- Erica Johnson, CFS/Facility PREA Compliance Manager

The agency and facility officials were very open and receptive to an honest discussion of all PREA issues.

Post Audit Phase

Upon completion of the onsite phase of the audit, the auditor and the agency PREA coordinator and facility PREA compliance manager agreed to communicate by email and telephone during the post audit phase, regarding any identified need for additional documentation, as well as clarification of questions that arose while collating data. Further, the facility PREA compliance manager and the agency PREA coordinator indicated that the facility would provide the auditor with proof of practice that the auditor would like to revisit.

Audit Section of the Compliance Tool:

The auditor used the required Prison Rape Elimination Act (PREA) Juvenile Standards to conduct the facility audit. The auditor used the PREA Online Audit System (OAS) to document the audit. Detailed information from the audit interviews were integrated into relevant sections of the standards. In order to ensure all standards were analyzed, the auditor proceeded standard by standard and provision by provision, to determine compliance or non-compliance.

Interim Report:

No interim report submitted.

Final Audit Report:

The final 2021 PREA Audit report was completed on 7/8/2021 and submitted to the facility.

AUDIT FINDINGS

Facility Characteristics:

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

The Hennepin County Adult Correctional Facility (ACF) is a medium security facility providing short-term custody and programming for adult offenders convicted for felony, gross misdemeanor, and misdemeanor offenses. Commitments are received primarily from the Hennepin County Fourth District Court, which may use the ACF as an alternative to long-term commitments to the Minnesota Department of Corrections. The maximum stay is 365 days. The average in house stay is 45 days.

The facility has two housing sections: The Men's Section with 399 beds, and Women's Section with 78 beds.

Men's Section:

This housing unit consists of two primary living units within this section: All male cells are single occupancy.

- A-Block has 183 individual general population cells. This block houses Residents who are classified as minimum and/or residents who are on our work release program. Additionally, there is 17 individual cells designated as Special Management which houses individuals who are administratively or behaviorally separated from general population.

- B-Block has 182 individual general population cells. This block houses Residents classified as medium risk. Additionally, there is 17 individual cells designated as Special Management which houses individuals who are administratively or behaviorally separated from general population.

Women's Section:

This housing units consists of five primary living units within this section:

- B Unit has five rooms with three beds in each room for a capacity of 15 Residents housed in this unit. Residents sin this unit are minimum risk.

- C Unit has five rooms with three beds in each room for a capacity of 15 Residents housed in this unit. Residents sin this unit are minimum risk.

- D Unit has 16 individual rooms for general population. Residents housed in this unit are medium risk.

- E Unit has 16 individual rooms for general population. Residents housed in this unit are medium risk.

- F Unit - Close

Both Men's and Women's housing are typically assigned by their classification level and/or Work Releases Program participation. Our objective classification SOP 07-01 outlines our point scale for determination on a resident's risk level.

The facility had 165 staff on board during the on-site visit. Medical and Mental Health Services are provided through a contract with Centurion Health, Inc.

Teachers are provided by the Robinsdale School district 287. There are 6-7 teachers teaching GED, English as a second language, and under 21 Education.

Medical and mental health services are provided by contract through Centurion and health care services are available in both the male and female living units.

The Sexual Violence Center, the local Rape Crisis Center, conducts groups weekly at the female unit.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	0
Number of standards met:	45
Number of standards not met:	0

Number of Standards Exceeded: 0

Number of Standards Met: 45

115.11- Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator
115.12 – Contracting with other entities for the confinement of Residents
115.13 – Supervision and Monitoring
115.14 – Youthful Resident
115.15 – Limits to cross-gender viewing and searches
115.16 – Residents with disabilities and Residents who are limited English proficient
115.17 – Hiring and promotion decisions
115.18 – Upgrades to facilities and technologies
115.21 – Evidence protocol and forensic medical examinations
115.22 – Policies to ensure referrals of allegations for investigations
115.31 – Employee training
115.32 – Volunteer and contractor training
115.33 – Resident education
115.34 – Specialized training: Investigations
115.35 – Specialized training: Medical and mental health care
115.41 – Screening for risk of victimization and abusiveness
115.42 – Use of screening information
115.43 – Protective custody
115.51 – Resident reporting
115.52 – Exhaustion of administrative remedies
115.53 – Resident access to outside support services and legal representation
115.54 – Third-party reporting
115.61 – Staff and agency reporting duties
115.62 – Agency protection duties
115.63 – Reporting to other confinement facilities
115.64 – Staff first responder duties
115.65 – Coordinated response
115.66 – Preservation of ability to protect Residents for contact with abusers
115.67 – Agency protection against retaliation
115.68 – Post Allegation protective custody
115.71 – Criminal and administrative agency investigations
115.72 – Evidentiary standard for administrative investigations
115.73 – Reporting to Residents
115.76 – Disciplinary sanctions for staff
115.77 – Corrective action for contractors and volunteers
115.78 – Interventions and disciplinary sanctions for Residents
115.81 – Medical and mental health screenings; history of sexual abuse
115.82 – Access to emergency medical and mental health services
115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers
115.86 – Sexual abuse incident reviews
115.87 – Data collection
115.88 – Data review for corrective action
115.89 – Data storage, publication, and destruction
115.401 – Frequency and scope of audits

115.403 – Audit contents and finding

Summary of Corrective Action (if any)

None

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	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Administration Policy: Prison Rape Elimination Act (PREA) • DOCCR Administration Procedures: Prison Rape Elimination Act (PREA) • DOCCR Workplace Safety, Environment and Safety Training Unit – PREA Definitions • Policy Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Agency Organizational Chart • Facility Organizational Chart • Resident Handbook • PREA Brochures • Grievances • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.11 (a)</p> <p>Agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency’s approach to preventing, detecting, and responding to such conduct.</p> <p>DOCCR policy Prison Rape Elimination Act (PREA): The Hennepin County DOCCR has zero tolerance for incidents of sexual abuse, misconduct and harassment. Reports of victimization can be made confidentially. All complaints of attempted sexual abuse, misconduct and harassment shall be reported promptly and thoroughly investigated by the appropriate authorities. Information regarding sexual abuse, misconduct or harassment shall only be disclosed to those who need to know for the purpose of investigation, decision making and/or prosecution.</p> <p>115.11 (b)</p> <p>The agency employs an upper-level, agency-wide PREA coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities.</p> <p>DCCR Policy and Procedures Administration, PRISON Rape Elimination Act (PREA) Section (A), Implementing PREA Department Level indicated that the agency designates a PREA coordinator to develop, implement and oversee all department-wide efforts to comply with the PREA standards.</p> <p>The agency has designated a higher-level staff to serve as PREA coordinator. This position is reflected on the agency’s organizational chart and depicts the Medical Contract Manager/Agency PREA Coordinator, who reports directly to the Institutional Services Planning and Oversight Office. The PREA coordinator, who is knowledgeable of the PREA standards. This was confirmed through reviewing agency policies, the agency’s organizational chart and interviews.</p> <p>The agency PREA coordinator oversees three facilities that implements the PREA standards. Each of the facilities has a PREA compliance manager who relates to the PREA coordinator. The PREA coordinator has sufficient time and authority to coordinator the agency’s efforts to comply with the PREA standards.</p> <p>Central Office Staff: The agency PREA coordinator indicated that she has enough time to manage all of her PREA related responsibilities.</p> <p>115.11 (c)</p> <p>Where an agency operates more than one facility, each facility has a designated PREA compliance manager with sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards.</p> <p>Central Office Staff: The agency PREA coordinator indicated that she oversees thee (3) facility PREA compliance managers. All three managers are supervised by facility administration; however, they connect on any PREA topics that arise. Including but not limited to; documentation, incidents, audit preparation, and training.</p> <p>Facility Staff: The facility’s designated PREA compliance manager (PCM) is a Correctional Institutional Supervisor who reports to the facility superintendent. This facility has taken additional step demonstrating a commitment to PREA. The PREA compliance manager has sufficient time and authority to coordinate the facility’s efforts to comply with the PREA Standards. She indicated that she work with the training coordinator to ensure that every staff member are up to date with their PREA training and refreshers.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 504 297">Supporting Information:</p> <ul data-bbox="242 331 1177 488" style="list-style-type: none"> • Contracts that involved resident confinement at other facilities surveys • Letter to Residential Facility Service Providers (PREA Contractor Impact) February 20, 2020 • Hyperlink to Contracts • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 521 347 548">115.12 (a)</p> <p data-bbox="242 577 1469 672">A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards.</p> <p data-bbox="242 701 1490 795">The online Pre-Audit Questionnaire documented that the facility has not entered or renewed a contract for the confinement of residents on or after August 20, 2012 or since the last PREA audit. This was also confirmed by the agency PREA coordinator.</p> <p data-bbox="242 824 1481 918">DOCCR policy requires the agency PREA coordinator to monitor new or renewing contracts for the confinement of residents to ensure that the contractor is complying with the PREA standards. Policy also includes an obligation to adopt and comply with the PREA standards in any new contract or contract renewal for the confinement of residents.</p> <p data-bbox="242 947 1481 1008">Monitor new or renewing contracts for the confinement of residents to ensure that the contractor is complying with the PREA standards.</p> <p data-bbox="242 1037 1474 1131">Central Office Staff: The agency contract administrator indicated for new contracts, that there is built in PREA compliance in the Request for Proposals as an expectation that they will need to adhere to if they serve more than 50% corrections clients and PREA language is added to the contracts, both new and renewed.</p> <p data-bbox="242 1160 1485 1288">To monitor compliance, a spreadsheet of all the residential facilities used by DOCCR is maintained on our PREA SharePoint site. Through a survey sent out to facilities, we update if they are serving mostly corrections or social services clients and then record if they are PREA compliant, working toward compliance, or it is not required because most of the residents are social services referrals.</p> <p data-bbox="242 1317 1465 1377">The agency contract administrator also indicated that the agency chosen not to renew one group home contract after 2020 who was not in compliance with PREA requirements and ceased referrals to this facility earlier this year.</p> <p data-bbox="242 1406 1465 1467">Most of the facilities used by DOCCR for youth, report having the majority of social services referrals and are therefore not subject to DOJ certified PREA audits.</p> <p data-bbox="242 1496 347 1523">115.12 (b)</p> <p data-bbox="242 1552 1477 1612">Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards.</p> <p data-bbox="242 1641 1481 1877">The DOCCR does include the following statement in all of their contracts with contractors and vendors; "Prison Rape Elimination Act: To the extent that the requirements are applicable to this agreement, contractor shall adopt and comply with the provisions of the Prison Rape Elimination Act of 2003) Public Law 108-79) (PREA), and implementing regulations. Contractor agrees to cooperate fully with the county to ensure contractor's compliance with the PREA standards, including but not limited to, upon county's request, supplying the county with full and complete documentation relating to PREA and allowing the county access to contractor's facilities. If there are subsequent contract renewals, evidence of PREA compliance needs to be demonstrated."</p> <p data-bbox="242 1906 1477 1966">The agency provides an example of a vender contract containing the required PREA language as well as other contracts for review. The reviewed contracts contained the required PREA Language.</p> <p data-bbox="242 1995 1426 2089">Central Office Staff: The agency contract administrator indicated we have not started any new contract in the past 12 months for residential facilities. All other facilities serving the majority of corrections clients, which DOCCR is currently utilizing for youth, are in compliance with PREA.</p> <p data-bbox="242 2096 1485 2157">DOCCR chose not to renew one group home contract after 2020 who was not in compliance with PREA requirements. One other group home facility, who was not PREA compliant as they had just opened in December of 2019, decided to close their</p>

doors in March of 2021 for financial reasons.

Most of the facilities used by DOCCR for youth, report having the majority of social services referrals and are therefore not subject to PREA requirements.

To monitor compliance, a spreadsheet of all the residential facilities used by DOCCR is maintained on the PREA share point site. Through a survey sent out to facilities, the agency update if they are serving mostly corrections or social services clients and then record if they are PREA compliant, working toward compliance, or it is not required because most of the residents are social services referrals.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Correction Facility Policy: PREA, Staffing Patterns and Resident Supervision • DOCCR Adult Correction Facility Procedures: PREA, Staffing Patterns and Resident Supervision • DOCCR Adult Corrections Facility Policy: Resident Well-Being Check Policy • DOCCR Adult Corrections Facility Procedures: Resident Well-Being Check Procedures • Women’s Section Daily Inspection Report • Men’s Section Daily Inspection Report • 2020 Staff Coverage (Daily Assignments) • Staffing Plan Assessment • Staff Assignment Sheet • Screen Shot Recording in Daily Computerized Log (Deviation from staffing Plan) • Duty Logs documenting Unannounced rounds Well Being Checks • Facility Layout • Facility Division Profile Report • Housing Plans • Camera Locations Diagrams • Camera Diagram for Outside • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.13 (a)</p> <p>The agency shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determine the need for video monitoring, facilities shall take into consideration:</p> <ul style="list-style-type: none"> • Generally accepted detention and correctional practices; • Any judicial findings of inadequacy; • Any finding of inadequacy from Federal investigative agencies; • Any findings of inadequacy from internal or external oversight bodies; • Any findings of inadequacy from internal or external oversight bodies; • All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); • The composition of the inmate population; • The number and placement of supervisory staff; • Institution programs occurring on a particular staff; • Any applicable State, or local laws, regulations, or standards; • The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and • Any other relevant factors. <p>Facility Staff: The superintendent responded to; does your facility have a staffing plan? Yes.</p> <p>Facility Staff: The superintendent responded to; are adequate staffing levels to protect residents against sexual abuse considered in this plan? Yes. Staffing levels at the facility are based on Minnesota Administrative rule 2911.900 and Department of Corrections Licensing Inspector.</p> <p>Facility Staff: The superintendent responded to; is video monitoring part of this plan? Yes. However, video monitoring is not use to replace staff direct supervision.</p> <p>Facility Staff: The superintendent responded to; is the staffing plan documented? Yes. Staffing plan is in the facility Staff Scheduling SOP and analysis is documented and submitted by our scheduling supervisor. Also posted on Department SharePoint and Staff Scheduling software.</p> <p>115.13 (b)</p> <p>In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.</p>

Facility Staff: The superintendent responded to; how do you check for compliance with the staffing plan? Scheduling records, data on absenteeism, incident reports, daily shift schedules and master schedule.

Facility Staff: The superintendent responded to; does the staffing documentation include explanations for non-compliance? Yes. Shift supervisor will document and forward to the CIS the reason the facility drops below shift compliance. In addition, entry is placed in daily log, daily shift scheduling supervisor is notified.

115.13 (C)

Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by standard 115.11, the agency shall assess, determine, and document whether adjustments are needed to:

- The staffing plan established pursuant to paragraph (a) of this section;
- The facility's deployment of video monitoring systems and other monitoring technologies; and
- The resources the facility has available to commit to ensure adherence to the staffing plan.

Central Office Staff: The agency PREA coordinator indicated that she is consulted regarding any assessments of, or adjustments to, the staffing plan for the facility per policy once per year.

115.13 (D)

Each agency operating a facility shall implement 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. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit staff from alerting other staff member that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

DOCCR Policy Well-Being Checks Procedure, Cellblock Supervisor, Duty Officer, or CIS indicates review completed Watch Tour Query sheets and video reviews weekly and address discrepancies as needed:

- Conduct unannounced rounds in living units and common areas on all shifts to identify and deter staff sexual abuse and sexual harassment.
- Prohibit staff from alerting other staff members when conducting your unannounced rounds.
- Document your rounds by scanning your ID card at the watch tour stations and initial the Daily Inspection Report.
- Document your rounds of common areas that do not have watch stations on a Daily Inspection Report.
- Document in writing any unusual circumstances or situations encountered during the round that will require reporting under PREA law or county policy.

Policy also requires the use of Com-Tec System's ALL PAGE function to make the following announcement at 7am, 11am, 3pm, 7pm, and 11pm: "Please be advised that there are staff of the opposite gender on post during the shift. These individuals may tour the cellblocks or view security cameras throughout the shift."

During the facility tour the auditor noted that the opposite gender was announcing their presence.

115.14	<p data-bbox="231 71 1508 1247">Youthful inmates</p> <p data-bbox="231 1247 1508 1310">Auditor Overall Determination: Meets Standard</p> <p data-bbox="231 1310 1508 1377">Auditor Discussion</p> <p data-bbox="231 1377 1508 1444">Supporting Information</p> <ul data-bbox="231 1444 1508 1512" style="list-style-type: none"> <li data-bbox="231 1444 1508 1478">• Online PREA Audit: Pre-Audit Questionnaire <li data-bbox="231 1478 1508 1512">• Interview <p data-bbox="231 1512 1508 1579">115.14 (a)</p> <p data-bbox="231 1579 1508 1668">A youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.</p> <p data-bbox="231 1668 1508 1758">During the site visit, review of documentation and informal staff interviews indicated that the facility does not housed youth offenders.</p> <p data-bbox="231 1758 1508 1825">115.14 (b)</p> <p data-bbox="231 1825 1508 1892">In areas outside of housing units, agencies shall either:</p> <ul data-bbox="231 1892 1508 1960" style="list-style-type: none"> <li data-bbox="231 1892 1508 1926">• Maintain sight and sound separation between youthful inmates and adult inmates, or <li data-bbox="231 1926 1508 1960">• Provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact. <p data-bbox="231 1960 1508 2049">During the site visit, review of documentation and informal staff interviews indicated that the facility does not housed youth offenders.</p> <p data-bbox="231 2049 1508 2116">115.14 (c)</p> <p data-bbox="231 2116 1508 2206">Agencies shall make best efforts to avoid placing youthful inmates in isolation to comply with this provision. Absent exigent circumstances, agencies shall not deny youthful inmates daily large-muscle exercise and any legal required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.</p> <p data-bbox="231 2206 1508 2240">During the site visit, review of documentation and informal staff interviews indicated that the facility does not housed youth offenders.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1225 656" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Searches Policy • DOCCR Adult Corrections Facility Procedures: Searches • DOCCR Adult Correction Facility Policy: PREA, Staffing Patterns and Resident Supervision • DOCCR Adult Correction Facility Procedures: PREA, Staffing Patterns and Resident Supervision • 2020 Search Refresher Training (In-Service) (# Roster Line Staff/Roster /Mgr./Roster Sup.) • Duty Log • Observation of Signs Announcing Opposite Gender • Observation of Opposite Gender Staff Making Announcements • Online PREA Audit: Pre-Audit Questionnaire Juvenile Facilities • Interviews <p data-bbox="240 689 347 716">115.15 (a)</p> <p data-bbox="240 750 1477 806">The facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners.</p> <p data-bbox="240 840 1442 896">DOCCR Searches Policy section (11) indicated ACF staff will not conduct cross-gender pat searches, cross-gender strip searches, or cross-gender visual body cavity searches (anal or genital opening).</p> <p data-bbox="240 929 1477 1086">Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, have you received training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs? Twelve (12) of the fourteen (14) state yes, two (2) was not sure whether it applies to different genders. However, all staff indicated that cross-gender searches are prohibited.</p> <p data-bbox="240 1120 347 1146">115.15 (b)</p> <p data-bbox="240 1180 1461 1303">As of August 20, 2015, or August 20, 2017 for a facility whose rated capacity does not exceed 50 inmates, the facility shall not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Facilities shall not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.</p> <p data-bbox="240 1337 1490 1460">Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, if female staff are not available to conduct pat-down searches of female inmates, does the facility restrict those inmates' access to programs or out-of-cell opportunities? All staff indicated no, that the security schedule always have female staff working.</p> <p data-bbox="240 1494 347 1520">115.15 (c)</p> <p data-bbox="240 1554 1390 1610">The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates.</p> <p data-bbox="240 1644 504 1671">See Section (a) response.</p> <p data-bbox="240 1704 347 1731">115.15 (d)</p> <p data-bbox="240 1765 1461 1888">The facility shall implement policies and procedures that enable 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. Such policies and procedures shall require staff of the opposite gender to announce their presence when entering an inmate housing unit.</p> <p data-bbox="240 1921 1477 2011">DOCCR Searches Policy section (12) indicated ACF non-medical staff will not view residents of the opposite sex when they are showering, performing bodily functions, and changing clothes, except incidental viewing during well-being checks or responding to emergency situations.</p> <p data-bbox="240 2045 1477 2134">Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. All staff indicated that residents are able to dress, shower, and use the toilet without being viewed by staff of the opposite gender.</p>

Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, are you and other inmates naked in full view of male/female staff when using the toilet, showering, changing clothing? All residents indicated that they have never been naked in full view of staff of the opposite gender.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, do you or other officers announce your presence when entering a housing unit that houses residents of the opposite gender (from yourself)? All staff indicated that they announce their presence when entering a housing unit that house residents of the opposite gender.

Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, do male/female staff announce their presence when entering your housing area? Thirteen (13) stated yes, three was not sure or did not here the announcements.

115.15 (e)

The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or inf necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

DOCCR Searches Policy sections (13-15) indicated ACF (13) will not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. (14) Contracted medical staff will meet with a resident whose gender is unknown and determine the individual's gender by conversing with the resident, reviewing medical records, or conducting a broader medical examination in private. (15) Correctional staff will ask individuals who self-identify as transgender or intersex if they prefer to be pat searched or strip searched by a male or female officer during the intake process.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, are you aware of the policy prohibiting staff from searching or physically examining a transgender or intersex inmate for the purpose of determining that inmates' genital status? Thirteen (13) staff indicated that they are aware of the policy prohibiting staff from searching or physically examining a transgender or intersex resident for purpose of determine that resident's genital status. One staff was not sure.

115.15 (f)

The agency shall train security staff in how to conduct cross-gender pat down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

DOCCR Searches Policy section (16) indicated ACF correctional staff will be trained in how to conduct searches of transgender and intersex residents to ensure such searches are completed professionally and respectfully and, in the least, intrusive manner possible, consistent with security needs.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Reception and Admission – Men’s Policy • DOCCR Adult Corrections Facility Policy: Reception and Admission – Women’s Policy • Men’s Section & Women’s Section Information and Guidelines for all Residents (Handbook English) • Men’s Section & Women’s Section Information and Guidelines for all Residents Handbook Spanish) • MOU Surad Interpreting & Translation • MOU A-Z Friendly Languages, Inc. • MOU Global Language Connections • MOU A-2300 Government Center • MOU Middle English Inc. • MOU University Language Center Inc. • MOU American Sign Language Interpretation • MOU Telephone Interpretive Service Contract with Language Line • DOCCR Policy, PREA: Institutional Reporting and Responding to Maltreatment and Sexual Abuse, Prison Rape Elimination Act • Staff ADA & LEP Training • DOCCR Policy: PREA: Resident Receiving and Orientation, Institutions • End the Silence Brochure translated into six Languages • Master Training Roster/Limited English Proficiency Plan • We Are A Zero Terrance Facility! Power Point • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.16 (a)</p> <p>The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency’s effort to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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, limited reading skill, or who are blind or have low vision. An agency is not required to take actions that it can demonstrated would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164.</p> <p>Central Office Staff: The agency head response to, has the agency established procedures to provide residents with disabilities and residents who are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment?</p> <p>Response: Yes, all written PREA information is translated into multiple languages including those most common among our population – Spanish and Somali. Individuals with disabilities are provided PREA information in a manner consistent with ADA. Intake officers check for understanding upon admittance to the facility.</p> <p>These procedures are all outlined in the PREA, Institutional Reporting and Responding Maltreatment and Sexual Abuse policy and procedures to include the following:</p> <ul style="list-style-type: none"> • Residents’ who have limited English proficiency and/or any physical or cognitive impairment which may impact their ability to report sexual abuse/harassment must be provided with assistance. • Only Hennepin County certified interpreters will be accepted as reporters on behalf of limited English proficiency residents. Use of residents as interpreters or for reporting or communicating written policy to other residents is prohibited. <p>Interviewed Target Residents: Four (4) target residents were interviewed. Two (2) were physically disabled. The residents were asked, does the facility provide information about sexual abuse and sexual harassment that you are able to understand? Both residents indicated yes.</p>

115.16 (b)

The agency shall 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

DOCCR Reception and Admission Policies for Men and Women section (25-26) indicated ACF (25) The Duty officer of designee, if necessary, may contract a bilingual staff member or a translator from Centralized Interpreter Services at (612) 348-9069 or Language Line Services at 1-888-259-5761 for residents unable to read or speak English. Staff may contact Hennepin County's coordinator at (612) 490-1587 for sign language interpreter services. Note: the duty officer will make arrangements for a staff member to read and explain the content of the resident handbook and institutional rule book to a resident who admits to being unable to read or is blind. Such an activity will be documented in the resident's OMS Notebook. (26) The ACF will not rely on resident interpreters, readers, or other assistants, except in limited circumstances where an extended delay in locating an effective interpreter may compromise resident safety, the performance of first-responder duties requires under, or the investigation of a resident's allegations.

115.16 (c)

The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay is obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under standard, or the investigation of the inmate's allegations.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, does the agency ever allow the use of inmate interpreters, inmate readers, or other types of inmate's assistants to assist inmates with disabilities or inmates who are limited English proficient when making an allegation of sexual abuse or sexual harassment? Eleven (11) indicated yes, and three (3) were not sure of the practice.

115.17	Hiring and promotion decisions
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 502 300">Supporting Information:</p> <ul data-bbox="240 331 1209 721" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy; Staff Code of Ethics and Standards of Conduct Policy • DOCCR Administration Policy: Criminal Records Check • DOCCR Administration Policy: PREA, Staffing Patterns and Resident Supervision • Minnesota Government Data Practices Act 13.01 • Background Checks - Newly Hire Staff • Background Checks - Regular Staff • Five Year Background Checks – Regular • Background Checks - Contractors • Five Year Background Checks – Contractors • Background Checks - Volunteers • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 757 347 784">115.17 (a)</p> <p data-bbox="240 815 1461 873">The agency shall not hire or promote anyone who may have contact with residents, and shall not enlist the services of any contractor who may have contact with residents, who:</p> <ul data-bbox="240 904 1490 1066" style="list-style-type: none"> • 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) • 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 inf the victim did not consent or was unable to consent or refuse; or • Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph a-2 of this section. <p data-bbox="240 1097 1469 1155">DOCCR Policy Criminal Record Checks section (3) indicated ACF/DOCCR prohibits the hiring or promotion of anyone who has:</p> <ul data-bbox="240 1187 1445 1281" style="list-style-type: none"> • Engaged in sexual abuse in an institutional setting; and/or • Conviction (s) for engaging in sexual abuse in the community facilitated by force, the threat of force, or coercion; and/or • Civil or administrative adjudications for having engaged in such activity. <p data-bbox="240 1312 1477 1438">The DOCCR Policy, Criminal Records Checks, places the authority for conducting criminal records checks with the DOCCR Office of Administrative Services (OAS) Unit. Policy prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents that meets the requirements listed above.</p> <p data-bbox="240 1469 1477 1630">The DOCCR Office of Administrative Services (OAS) Unit has the authority to manage and conduct criminal record checks. This is established in DOCCR Policy, Criminal Records checks. The Pre-Employment Questionnaire solicits required information from previous employers using the PREA Employment Mailing Form containing a signed consent for the release of information and conducts background checks including finger-prints. The level of the check depends on the level of contact the employee, volunteer, contractor or intern would have with the youth.</p> <p data-bbox="240 1662 1477 1823">Interview staff revealed a very through process for conducting background checks including contacting former employers, criminal record checks every five years for as staff, volunteers and non-escorted contractors and vendors. Procedures for accessing the database and running five (5) year background checks where provided. The PREA Employment Mailer, is a reference check sent to former employees as conditional hires after the staff signs the consent for the release of information. The form asks the three PREA Questions.</p> <p data-bbox="240 1854 1477 1948">DOCCR Policy, Criminal Records Checks, Policy, prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who has been civilly or administratively adjudicated to have engaged in the activity described.</p> <p data-bbox="240 1980 347 2007">115.17 (b)</p> <p data-bbox="240 2038 1477 2096">The agency shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents.</p> <p data-bbox="240 2128 1414 2154">The agency considers incidents of sexual harassment in determining whether to hire or promote staff and contractors.</p>

The Office of Administrative Services conducts background check of Centurion Staff (contracted medical and mental health staff).

Personal Package Include: Contractors

- Access Request Result Notification
- Criminal Record Summary
- Authorization for Record Access (Criminal Record Checks)
- Fingerprint Record Check
- PREA Conditional Hire/Placement Questions
- Minnesota Justice Information Services (MNJIS) (Bureau of Criminal Apprehension)
- NAC Office Employee (Required Questions Standard 17)

Personal Packages Includes: Volunteers

- Access Request Result Notification
- Name Query Only or Recheck Checklist
- Criminal Record Summary
- Authorization for Record Access (Criminal Record Checks)

Personal Packages Includes: Promotions

- Promotion Checklist
- Criminal Record Summary
- Authorization for Record Access (Criminal)
- Finger Print Record Checks
- PREA Conditional Hire/Placement Questions
- Lateral Transfer and Promotion Referral

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that the facility perform criminal record background checks or consider pertinent civil or administrative adjudications for all newly hired employees who may have contact with residents and all employees, who may have contact with residents and employees, who may have contact with residents, who are considered for promotions as required by the PREA Staffing Patterns and Resident Supervision policy outlines this information. The same process is conduct for contractors.

115.17 (c)

Before hiring new employees, who may have contact with residents, the agency shall:

- Perform a criminal background records check; and
- Consult any child abuse registry maintained by the State or locality in which the employee would work;
- 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.

The employee hiring package includes, but not limited to:

- Conditional Hire Background Study Questionnaire
- Previous Background Studies/Investigations
- Professional Licenses and Permits
- Employment History
- Driver's License History
- Civil Court Action (Public Record)
- Criminal Justice Involvement (Overview)
- Arrest/Law Enforcement Contact
- Criminal Court Involvement
- PREA Conditional Hire Questions
- Background Study Summary
- Authorization for Record Access (Criminal Record Checks)
- Private Information Release Form
- PREA Employee Questionnaire
- Minnesota Justice Information Services (MNJIS) (Bureau of Criminal Apprehension)
- Finger Prints

When the background study is completed the OAS, Unit sends the Background Check/Criminal Record Check Result

Notification to the program, documenting the Background Check Result, Level of Access and Expiration Date of the Criminal Background Check Results (documenting the five-years check requirements). This form documents that Driver's License and insurance needs to be checked annually.

The agency provided a master roster of employees, including contractors.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that the facility perform criminal record background checks or consider pertinent civil or administrative adjudications for all newly hired employees who may have contact with residents and all employees, who may have contact with residents and employees, who may have contact with residents, who are considered for promotions as required by the PREA Staffing Patterns and Resident Supervision policy outlines this information.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that the facility considers prior incidents of sexual harassment when determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. The PREA Staffing Patterns and Resident Supervision policy requires interviewers to ask these questions. Also, a review of persons involvement in any PREA related incidents is conducted during the criminal record check process.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that the system the facility presently has in place to conduct criminal record background checks of current employees and contractors who may have contact with residents. DOCCR conducts criminal background checks of current employees and contractors who may have contact with residents. DOCCR utilizes the Minnesota Bureau of Criminal Apprehension (BCA) system which accesses the FBI CJIS and NCIC criminal record systems. All DOCCR employees are finger printed. During the criminal background check, DOCCR also accesses MNCIS (Minnesota Court Information System) and may utilize DVS (Department of Vehicle Services) and Wisconsin Circuit Court Results. DOOCR conducts background checks of current employees at least once every five years as directed by DOCCR PREA Staffing Patterns and Resident Supervision policy and Criminal Record check policy.

It was also indicated that these background checks are conducted at least once every 5 years.

115.17 (d)

The agency shall also perform a criminal background records check, and consult applicable child abuse registries, before enlisting the services of any contractor who may have contact with residents.

DOCCR Policy, Criminal Record Checks, in Paragraph 13, requires that individuals working in a juvenile correctional facility must pass a Minnesota Department of Human Services (DHS) background study in addition to the criminal record check required by the Officer of Administrative Services. Reviewed background checks documented the DHS Background Checks as required.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that before hiring new employees or contractors who may have contract with residents, does the facility consult any child abuse registry maintained by the State or locality in which a potential employee/contractor would work. All new employees and contract employees are required to pass a Minnesota Department of Human Services backgrounds study which includes any child abuse registries. This is required for anyone who will have the ability to provide direct contact/care of residents. Direct contact care services mean providing face-to-face care, training, supervision, counseling, consultation or medication assistance to person served by the program (Minnesota Statute 245C.02, Subd. 11).

115.17 (e)

The agency shall either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees.

DOCCR Policy, Criminal Record Checks, described the required record checks for Conditional Hires, Permanent Employees, and Volunteers, Interns and Contract Staff. Conditional hires are required to have a finger print check conducted by OAS after a conditional offer of employment had been accepted. Permanent employees have a name query record check conducted by OAS for promotions, lateral transfers and five-year checks (since the last record check). Policy requires that employees are advised six months prior to their 5th year since their last background check. Volunteers, Interns and Contract Staff have finger print checks conducted by OAS at initial hire and when unrestricted access is requested. Names record queries are conducted by OAS when five years are elapsed since the last record check.

The agency has a database that is pulled up weekly to determine which staff need a 5-year background check.

See Section (c) response.

115.17 (f)

The agency shall ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct.

Interview staff revealed a very thorough process for conducting background checks including contacting former employers, criminal record checks every five years for as staff, volunteers and non-escorted contractors and vendors. Procedures for accessing the database and running five (5) year background checks were provided. The PREA Employment Mailer, is a reference check sent to former employees as conditional hires after the staff signs the consent for the release of information. The form asks the three PREA Questions.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that the facility does ask all applicants and employees who may have contact with resident about previous misconduct described in standards, in written applications for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current.

115.17 (g)

Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

DOCCR PREA, Staffing Patterns and Resident Supervision section (10) indicated ACF were permitted by law, institutional managers/designee must ask all applicants and current employees directly about previous misconduct in situations of new hire, promotions, or performance evaluation. Material omissions or false information will be grounds for termination.

115.17 (h)

Unless prohibited by law, the agency shall 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.

Interviewed Specialized Staff: The DOCCR administrative services access unit manager indicated that when a former employee applies for work at another institution, upon request from that institution, the facility provide information on substantiated allegations of sexual abuse or sexual harassment involving the former employee, unless prohibited by law.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.18 (a)</p> <p>When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse.</p> <p>Informal interviewed staff indicated that when designing or acquiring any new facility and in planning any substantial expansion or modification that sexual safety and all forms of safety are given the utmost consideration in the design and planning of any new facilities and in the modification of any existing facility.</p> <p>Central Office Staff: The agency head indicated that resident safety is the primary concern in any physical facility modifications. This includes protecting residents from sexual assault. Facility modifications that do not meet standards for resident safety are not pursued.</p> <p>Facility Staff: The superintendent responded to; how has the facility considered the effect any expansion or modification upon the facility's ability to protect inmates from sexual abuse? The facility had no expansions or modifications.</p> <p>The agency has not made any substantial modifications to the facility since the last PREA Audit.</p> <p>115.18 (b)</p> <p>When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect residents from sexual abuse.</p> <p>Facility Staff: The facility PREA compliance manager confirmed that prior to any modifications to the facility, as well as upgrades or additions to video monitoring, the team would consider how these changes would impact keeping residents safe.</p> <p>Central Office Staff: The agency head indicated that the facility is equipped with multiple CCTV cameras, affording staff the ability to remotely monitor resident and staff activity while still providing for appropriate levels of resident privacy.</p> <p>Facility Staff: The superintendent responded to; when installing or updating monitoring technology, such as a video monitoring system or electronic surveillance, how has the facility considered using such technology to enhance inmates' protection from sexual abuse? The facility look at placing cameras in strategic locations to cover blind spots, common areas, two-way voice communication, etc..</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:• Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020</p> <ul style="list-style-type: none"> • Hennepin County Sheriff's Office PREA Policy 904 • DOCCR Administration Policy: Professional Standards and Conduct Investigations • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals • DOCCR Administrative Policy: Professional Standards and Conduct Investigations • DOCCR Administrative Policy: Professional Standards and Conduct, Incident Intake and Triage • DOCCR First Responder Cards: First Responder Questions and DOCCR Sexual Abuse First Responder Check list • DOCCR Preventing and Reporting Sexual Misconduct with Residents - Brochure • MOU Sexual Violence Center, and Centurion, Inc. • Sexual Violence Center Executive Director Comments • Medical Referral Form • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.21 (a)</p> <p>To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for an obtaining usable physical evidence for administrative proceedings and criminal prosecutions.</p> <p>The agency (DOCCR) is responsible for conducting administrative investigations only. This was confirmed through reviewing agency policy, the Hennepin County Sheriff's Office policy. The Hennepin County Sheriff's Office conducts criminal investigations and the reviewed agency Memorandum of Agreement affirms those administrative investigations and the reviewed agency Memorandum of Agreement affirms that administrative investigations are conducted by the DOCCR Professional Standards and Conduct unit.</p> <p>DOCCR Policy, Professional Standards and Conduct: Investigations, Paragraph 2, requires that department investigations will be conducted only by DOOCR approved and trained investigators. It requires, in paragraphs 3 and 4, that all allegations of sexual abuse and sexual harassment will be referred to the PS&C for investigation and/or when required, to law enforcement, pursuant to the MOU with the Hennepin County Sheriff's Office and that when complaints involved criminal misconduct, they will be immediately referred to law enforcement. DOCCR Policy: Incident Intake and Triage, paragraph 4., requires criminal misconduct complaints to be immediately referred to law enforcement by PS&C pursuant to the MOU with the Hennepin County Sheriff's Office. Paragraph 6, requires all referrals and investigations are subject to MS 13-43, Minnesota Governmental Data Practices Act and PREA requirements. PS&C will initiate all DOCCR requests for law enforcement investigation and/or County Attorney consultation as appropriate. The reviewed Hennepin County Sheriff's Office, policy 904, Prison Rape Elimination, requires that only investigators who have received office approved special training will be allowed to conduct sexual abuse investigation. Policy provides a consistent protocol for conducting sexual abuse/assault investigations.</p> <p>When conducting sexual abuse investigations, the investigators follow a uniform evidence protocol. The Department's Professional Standard and Conduct unit refers all sexual abuse allegations to the Hennepin County Sheriff's Office (HCSO) for investigations. The agency provides a Memorandum of Understanding between the Hennepin County Department of Community Corrections and Rehabilitation and the Hennepin County Sheriff's Office, dated May 4, 2017, affirms that the Hennepin County Department of Community Corrections (DOCCR) Personal Standards and Conduct (PS&C) Unit will triage initial complaints prior to referring to the HCSO for criminal complaints; provide departmental contact information to HCSO; serve as a point of contact for any referred cases or complaints; conduct administrative investigations for all cases returned as a result of no criminal complaint being filed; and providing requested records r information to aid in the investigations.</p> <p>The Hennepin County Sheriff's Office agrees to fully investigate complaints forwarded by the DOCCR; submit completed investigations to the Hennepin County Attorney's Office in a timely manner to allow for prompt completion or any interna administrative investigation deemed necessary by the DOCCR; adhere to PREA guidelines for investigations, where applicable; provide DOCCR a point of contact for reasonable status reports regarding active investigations; and providing final investigation reports on referred cases.</p> <p>Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, do you know and understand the agency's protocol for obtaining usable physical evidence if an</p>

inmate alleges sexual abuse? All the staff indicated that they understand the protocol. They discuss the steps of first responder duties and provide the auditor with their pocket card.

115.21 (b)

The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be 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.

Hennepin County Sheriff's Office Prison Rape Elimination Policy, 904.3 requires the PREA coordinator to ensure a protocol is developed for investigating allegations of sexual abuse and the protocol must include evidence collection practices that maximize the potential for obtaining usable physical evidence based on the most recent edition of the US DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents" or a similarly comprehensive and authoritative protocol.

The facility provided a MOU between the Hennepin County Department of Community Corrections and Rehabilitation, Sexual Violence Center and Centurion, inc. The reviewed MOU and interviews with staff from the Sexual Violence Center confirmed the Sexual Violence Center provides direct services to victims of sexual violence who are at least twelve years of age or older. Services are free and include the following:

- 24-hour crisis line;
- Support during evidentiary exams
- Support groups
- 1:1 counseling
- Legal advocacy
- Personal advocacy
- Assistance with filing for reparations
- Accompaniment to court/law enforcement

Centurion will provide, on a regular and continual basis (7 days/week, 24 hours/day) professional medical, dental, mental health and other related health care and administrative services for the residents in the county facilities and programs. The services include emergency medical care as well as mental health and psychiatric services.

115.21 (c)

The agency shall offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document its efforts to provided SAFEs or SANEs.

The facility offers to all residents who experience sexual abuse access to forensic medical examinations at not financial cost to the victim. Victims will have a forensic exam at the Hennepin County Medical Center. This documented in the DOCCR policy and in the Hennepin County Sheriff's Office PREA Policy 904. The Sexual Assault Resource Service (Sexual Assault Nurse Examiner Program), Hennepin County Medical Center's section entitled, "How will this exam be paid for? States that the county in which an individual was assaulted is required by law to pay for the victim's forensic exam. It advises the victim to contact the SAR. Office if they receive any bills for the exam.

115.21 (d)

The agency shall attempt to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provided victim advocates services, the agency shall make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g (b) (2) (c), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement) and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services.

The facility provided a MOU between the Hennepin County Department of Community Corrections and Rehabilitation, Sexual Violence Center and Centurion, inc. The reviewed MOU and interviews with staff from the Sexual Violence Center confirmed the Sexual Violence Center provides direct services to victims of sexual violence who are at least twelve years of age or older. Services are free and include the following:

- 24-hour crisis line;

- Support during evidentiary exams
- Support groups
- 1:1 counseling
- Legal advocacy
- Personal advocacy
- Assistance with filing for reparations
- Accompaniment to court/law enforcement

Centurion will provide, on a regular and continual basis (7 days/week, 24 hours/day) professional medical, dental, mental health and other related health care and administrative services for the residents in the county facilities and programs. The services include emergency medical care as well as mental health and psychiatric services.

The Sexual Violence Center agrees to provide:

- face-to-face crisis counseling to victims of sexual violence;
- maintain confidentiality as outlined in the SVC's informed consent form
- provide a rape crisis counselor at the hospital
- offer follow-up services as requested.

Facility Staff: The facility PREA compliance manager responded to, if the requested by the victim, does a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and provide emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews? Yes. The Sexual Violence Center.

115.21 (e)

As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization staff member shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.

The Hennepin County Medical Center will have sexual assault nurse examiners and if there were none available, a qualified medical practitioner would perform the forensic medical examinations. The brochure entitled Sexual Assault Resources Services, telling the victim what will happen at the hospital, advises they will be cared for by a skilled and highly trained Sexual Assault Nurse Examiner who will explain to the victim what will happen while at the hospital and to answer any questions the victim may have. The exam process is the discussed. The brochure advises the victim they have the right to decline any part of the exam at any time.

The facility does not have a MOU with the hospital however in their agency planning and in compliance with the Hennepin County Sheriff's Office PREA Policy, the victims will be examined at the Hennepin County Medical Center by a Sexual Assault Nurse Examiner. The Sexual Assault Resources affirms that victims of sexual abuse will be examined by a Sexual Assault Nurse Examiner at the Hennepin County Medical Center.

The Sexual Violence Center organization would provide an advocate to meet inside or outside the facility. An advocate from the agency would be automatically dispatched as a part of the 911 notification process. The Sexual Violence Center provides coverage and accessibility 24/7. The SVC has approximately 15 staff advocates and about 90 volunteer advocates. The organization operates in compliance with state statutes and complies with the state statute training requirements. The statutes require 40 hours of training for an advocate.

115.21 (f)

To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section.

The requirements of paragraphs a-f will be applied to any investigations.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, who investigate PREA incidents at this facility? Ten (10) staff know who the investigator was, and four (4) staff did not know who investigate PREA cases.

115.21 (g)

The requirements of paragraphs (a) through (f) of this section shall also apply to:

- Any State entity outside of the agency that is responsible for investigating allegations of sexual abuse in juvenile facilities; and
- Any Department of Justice component that is responsible for investigating allegations of sexual abuse in juvenile.

The requirements of paragraphs a-f will be applied to any investigations.

115.21 (h)

For the purposes of this section, a qualified agency staff member or a qualified community-based staff member shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general.

The Sexual Violence Center organization would provide an advocate to meet inside or outside the facility. An advocate from the agency would be automatically dispatched as a part of the 911 notification process. The Sexual Violence Center provides coverage and accessibility 24/7. The SVC has approximately 15 staff advocates and about 90 volunteer advocates. The organization operates in compliance with state statutes and complies with the state statute training requirements. The statutes require 40 hours of training for an advocate.

115.22 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

Supporting Information:

- Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020
- Hennepin County Sheriff's Office PREA Policy 904
- DOCCR Administration Policy: Professional Standards and Conduct Investigations
- DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse
- DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals
- DOCCR Administrative Policy: Professional Standards and Conduct Investigations
- DOCCR Administrative Policy: Professional Standards and Conduct, Incident Intake and Triage
- DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals
- DOCCR First Responder Cards: First Responder Questions and DOCCR Sexual Abuse First Responder Check list
- DOCCR Preventing and Reporting Sexual Misconduct with Residents – Brochure
- DOCCR Adult Corrections Facility Procedures: Resident Grievance and Complaint
- DOCCR Adult Corrections Facility Policy: Resident Grievance and Complaint
- MOU Sexual Violence Center, and Centurion, Inc.
- Sexual Violence Center Executive Director Comments
- Hennepin County Duty Supervisor-Sexual Abuse Response Checklist (# All Investigations)
- Mental Health Referral Forms Booking (# All Investigations)
- Mental Health Referral Forms In-House (# All Investigations)
- Investigations (# All) Past 12 Months
- Incident Reports (# All)
- Investigation Referral: Performance Assessment (# All)
- DOCCR Website Instructions for Reporting Incidents of Sexual Abuse, Sexual Misconduct of Sexual Harassment and Investigation
- Online PREA Audit: Pre-Audit Questionnaire
- Interviews

115.22 (a)

The agency shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

DOCCR Policy, Chapter 12, Prison Rape Elimination Act (PREA) affirms the agency's zero tolerance for incidents of sexual abuse, misconduct and harassment to be reported promptly and thoroughly investigated by the appropriate authorities. The agency also has a policy that requires allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. That agency with legal authority conducts sexual abuse investigations in the Hennepin County Sheriff's Office and the relationship is described in a Memorandum of Understanding between the DOCCR and the Hennepin County Sheriff's Office.

115.22 (b)

The agency shall have in place a policy 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. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.

DOCCR Policy, Professional Standards and Conduct; Incident Intake and Triage, in paragraph 4, requires complaints involving criminal misconduct will be immediately referred to law enforcement by PS&C pursuant to the Memo of Understanding with the Hennepin County Sheriff's Office. All referrals and investigations are subject to the PREA requirements. Paragraph 10, requires PS&C to initiate all DOCCR requests for law enforcement investigation and/or County Attorney consultation as appropriate.

The agency provided a Memorandum of Understanding between the Hennepin County Department of Community Corrections and Rehabilitation and the Hennepin County Sheriff's Office, affirms that the Hennepin County Department of Community Corrections (DOCCR) Personal Standards and Conduct (PS&C) Unit will triage initial complaints prior to referring to the HCSO for criminal complaints; provide departmental contact information to HCSO; serve as a point of contact for any referred cases or complaints; conduct administrative investigations for all cases returned as a result of no criminal complaint being filed; and providing requested records or information to aid in the investigation. The Hennepin County Sheriff's Office

agrees to fully investigate complaints forwarded by the DOCCR; submit completed investigations to the Hennepin County Attorney's Office in a timely manner to allow for prompt completion or any internal administrative investigation deemed necessary by the DOCCR; adhere to PREA guidelines for investigations, where applicable; provide DOCCR a point of contact for reasonable status reports regarding active investigations; and providing final investigation reports on referred cases.

The Hennepin County Department of Correction (PREA) website, informs viewers the agency has a zero tolerance for all forms of sexual abuse, misconduct or harassment and encourages them if they know of an incident of sexual abuse, misconduct or harassment that occurred at a DOCCR facility, to report it using the steps outlined on the page and clicking on the link, "reporting sexual abuse or sexual harassment in a DOCCR facility". The viewer is then given two ways to report: 1) Send an email to (email address given) or 2) Call (phone number given). The agency then states, "DOCCR investigates all incidents involving criminal conduct". The phone number is given for the Hennepin County Sheriff's Office and the number for the Professional Standards and Conduct Unit.

Central Office Staff: The agency head indicated yes that the facility ensure that administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. She stated that as indicated in the AOS Investigative referrals policy and the agency Professional Standards and Conduct Investigation policy.

Central Office Staff: The investigation manager indicated yes to the question, does agency policy require that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior.

115.22 (c)

If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.

115.22 (d)

Any State entity responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in juvenile shall have in place a policy governing the conduct of such investigations.

Central Office Staff: The agency head describe how and administrative or criminal investigation is completed for allegations of sexual abuse or harassment. She indicated that criminal investigations are handled by the Hennepin County Sheriff's Office independent from DOCCR and agreed upon via a memorandum of understanding between the two agencies.

Administrative investigations are handled by DOCCR's Office of Administrative Services, Professional Standard and Conduct Unit. Administrative investigations are reviewed for policy compliance as well as training needs and potential policy/procedural changes necessary to prevent similar incidents in the future. Evidence reviewed include facility video footage, any available physical evidence, and statements from involved parties and witnesses.

The PREA investigation summaries include but not limited to:

- Complainant or Incident initiated
- Type of Incident
- PREA Standard
- Immediate Response
- Reports/Statements
- Interviews
- Video Review
- Documents Reviewed
- PREA Review Findings
- Mental Health Assistance Provided
- Complainant Notified
- PREA Incident Review Required

115.22 (e)

Any department of Justice component responsible for conducting administrative or criminal investigations of sexual abuse or sexual harassment in juvenile shall have in place a policy governing the conduct of such investigations.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Administration Policy: Prison Rape Elimination Act (PREA) • DOCCR Administration Procedures: Prison Rape Elimination Act (PREA) • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse. • First Responder Cards • Preventing and Reporting Sexual Misconduct with Resident – Brochure • PREA Training Matrix by Job Class • PREA 101 – eLearning Course • NIC Training (151 Slides) – eLearning developed by the National Institute of Corrections • PREA: Effective and Professional Communication with LGBTI Residents and Clients • Talking Points for the “Preventing and Reporting Sexual Misconduct with Offenders” Brochure • Staff Training Acknowledgements • Staff Training Spread Sheet • PREA Boundaries Slide Presentation • PREA, Victim Reactions and Sexual Abuse – Slide Presentation • Supervisor’s Scenarios • Supervisors PREA Orientation • PREA Refresher Training Matrix • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.31 (a)</p> <p>The agency shall train all employees who may have contact with residents on:</p> <ul style="list-style-type: none"> • Its zero-tolerance policy for sexual abuse and sexual harassment; • How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; • Residents’ right to be free from sexual abuse and sexual harassment; • The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; • The dynamics of sexual abuse and sexual harassment in confinement; • The common reactions of sexual abuse and sexual harassment victims; • How to detect and respond to signs threatened and actual sexual abuse; • How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and • How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. • Relevant laws regarding the applicable age of consent. <p>The facility has a detailed Training Matrix identifying the training that different levels of staff are required to complete. The Agency Training Representative related how the training plans for the Department are developed.</p> <p>The plan is dependent upon the individual facility/program needs and developed with the input from facility training coordinators and will address what is determined to be the needs for PREA refresher for a given year. The reviewed Training Matrix identified these topics for all staff: 1) Zero Tolerance 2) How to fulfill responsibilities 3) Offender’s Right to be free from sexual abuse and sexual harassment 4) Offender’s and staff rights to be free from sexual abuse and sexual harassment 5) How to avoid inappropriate relationships 6) Communicating effectively with LGBTI residents 7) Responsibilities of First Responders</p> <p>It identified these additional trainings for staff who have contact with residents: 1) Dynamics of sexual abuse and sexual harassment 2) Common reactions to sexual abuse and sexual harassment 3) Detecting and responding 4) Mandatory Reporting Laws 5) Searches (pat searches and searches of transgender and intersex residents in a professional and respectful manner). 6) Disabled/LEP Equal opportunity to participate in or benefit from all aspects of the agency’s efforts to protect, detect, and respond to sexual abuse</p> <p>The Curricula for PREA 101 was provided and the PREA 101 and separate Power Point Presentations are used to train staff, encompassing more than is required by the standards. They covered the required PREA Topics required by the standards and then went above and beyond the required training. The agency tracks the training provided and attended by the contracted Centurion Medical and Mental Health Staff. Interviews with staff confirmed they are very knowledgeable of PREA</p>

and PREA related topics. Specialized training for investigators is addressed and documents were provided to confirm their specialized training.

DOCCR Policy requires training in the following: 1) Definitions of sexual abuse, sexual misconduct and sexual harassment, 2) Staff responsibilities under DOCCR's PREA policy, 3) Informs staff of the process for reporting PREA incidents, 4) Alerting staff to recognize the signs of offender sexual victimization. 5) Clarifying staff understanding of their responsibility in the detection, protection, reporting and consequences, 6) Teaching staff that a client/resident alleging sexual abuse is the alleged victim of a criminal act and, by law, their identity must remain confidential.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Twelve (12) indicated that they received all the required training and can list training topics. Two (2) staff had some difficulties remembering key topics.

115.31 (b)

Such training shall be tailored to the unique needs and attributes of residents of juvenile facilities and gender of the residents at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that house only male residents to a facility that houses only female residents, or vice versa.

The facility housed male and female residents. DOCCR Policy Prison Rape Elimination Act (PREA) section (D) Training, design and deliver to staff training which includes, but is not limited to the following:

- Defines sexual abuse, sexual misconduct, and sexual harassment;
- Informs staff of the process for reporting PREA incidents;
- Alerts staff to recognize the signs of offender sexual victimization;
- Clarifies staff understanding of their responsibility in the detection, prohibition, reporting, and consequences of sexual abuse, sexual misconduct, and sexual harassment;
- Teaches staff that a client/resident alleging sexual abuse is the alleged victim of a criminal act and by law their identity must remain confidential

115.31 (C)

All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies.

Policy also requires that staff receive PREA refresher training once every two years following initial training. Training however is conducted at least annually and that training is either in class or online via the APEX system. The agency provided the DOCCR PREA Refresher Training Course objectives that include the following: 1) Staff will understand PREA procedures; 2) Staff will identify ways to prevent PREA related allegations; and 3) Staff will describe the steps of DOCCR PREA investigative process. The training outline included the following: 1) Reasons for PREA refresher training; 2) Procedures for responding to report a PREA violation; 3) Ways to prevent PREA related allegations; 4) Appropriate response to PREA Complaints; 5) Q&A and scenarios. The facility provided the auditor with computer generated training rosters; one of which documented the cumulative training for all staff. Computerized training records documented the following: Policy Acknowledgements, Scenario Based PREA; PREA Boundaries; PREA 101, An introduction and overview, PREA Effective and Professional Communication with LGBTI; Mandated Reporting; Limited English Proficient, PREA Corrective Action Policy, Documents and Procedure Acknowledgment and Understanding.

115.31 (d)

The agency shall document, through employee signature or electronic verification, that employees understand the training they have received.

The provided master training rosters documented 95% in all categories.

115.32	Volunteer and contractor training
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 502 300">Supporting Information:</p> <ul data-bbox="242 329 1469 622" style="list-style-type: none"> • DOCCR Administration Policy: Prison Rape Elimination Act (PREA) • Prison Rape Elimination Act Volunteer Training Confirmations Forms • All ACF PREA Training to enter into BI 5-13-2020 Roster • Sexual Misconduct Brochure for Volunteers (How to report, protection from retaliation, receiving a report, red flags, abuse of power, consequences of sexual abuse/harassment and misconduct) • Taking points for Prevention and Reporting • DOCCR Website – Volunteer Services (how to become a volunteer with DOCCR-link to PREA Video and Training) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 654 347 683">115.32 (a)</p> <p data-bbox="242 712 1458 804">The agency shall ensure that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</p> <p data-bbox="242 835 1477 963">The agency volunteer coordinator, in an interview, described the process for recruiting and/or handling applications for volunteers. She related that upon completion of their background checks, she calls them in for their orientation. The orientation includes the link to watch the PREA Video. They read the zero- tolerance policy, told how to report and are given the PREA brochure to read.</p> <p data-bbox="242 994 1485 1155">Staff responsible for contractor training stated contractors receive the Contractor letter and PREA Brochure, including boundaries and reporting. The agency’s website advises volunteers that they must view the PREA 101 video. The link to that video is provided. They must also, according to the website review the PREA Pamphlet for Volunteers entitled: “Preventing and Reporting Sexual Misconduct with Offenders” and read and sign the PREA Acknowledgement Statement affirming their receipt and understanding of the training information provided.</p> <p data-bbox="242 1187 347 1216">115.32 (b)</p> <p data-bbox="242 1245 1474 1337">The level and type of training provided to volunteers and contractors shall be based on the services they provided and level of contact they have with residents, but all volunteer and contractors who have contact with residents shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.</p> <p data-bbox="242 1368 1490 1662">Volunteers are provided with the DOCCR Zero-Tolerance policy and brochure entitled, “Preventing and Reporting Sexual Misconduct with Offenders” and asked to view the video on the Prison Rape Elimination Act. They are also provided the websites for additional PREA related information, including the PREA Resource Center. The agency provided talking points for the volunteer coordinator in explaining information in the PREA brochure. These included, “What PREA Sexual Misconduct, Sexual Abuse and Sexual Misconduct, Abuse of Power is, Why Consensual Relationships are Unethical, Red Flags, what to do if you receive a report of sexual abuse, how to report, Victim Services and Protection from Retaliation. Volunteers then acknowledge receiving the following information: 1) Responsibilities under DOCCR’s policies and procedure; 2) DOCCR’s Zero Tolerance for sexual abuse and sexual harassment; and 3) Information on how to report sexual abuse and sexual harassment.</p> <p data-bbox="242 1693 347 1722">115.32 (c)</p> <p data-bbox="242 1751 1426 1809">The agency shall maintain documentation confirming that volunteers and contractors understand the training they have received.</p> <p data-bbox="242 1841 798 1870">A Volunteer Training Roster documented all volunteers.</p> <p data-bbox="242 1901 502 1930">See section (a) response.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1086 689" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Receiving and Orientation • DOCCR Adult Corrections Facility Procedures: Resident Receiving and Orientation • Resident Acknowledgement Forms • Resident Acknowledgement Forms • End the Silence Brochure • Resident Handbook (English) Men & Women • Resident Handbook (Spanish) Men & Women • Multiple PREA Related Posters • Contracts to Provide Interpretive Services • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 723 347 750">115.33 (a)</p> <p data-bbox="240 779 1469 840">During the intake process, inmates shall receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.</p> <p data-bbox="240 869 1441 929">DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (2 – 4) indicates all incoming and current residents of DOCCR institutions must be fully informed of the:</p> <ul data-bbox="240 958 1326 1055" style="list-style-type: none"> • DOCCR’s zero tolerance policy for sexual abuse, sexual misconduct, and sexual harassment. • DOCCR’s and divisions’ processes for reporting sexual abuse, sexual misconduct, and sexual harassment. • Residents’ rights to be free from retaliation for reporting sexual abuse and sexual harassment. <p data-bbox="240 1084 1485 1180">(3) Divisions must meet department time parameters for providing DOCCR institutional residents with the information specified by policy statement 2 above. Refer to PREA, Resident Receiving and Orientation, Institutions (Procedures) for time parameters.</p> <p data-bbox="240 1209 1457 1270">(4) Divisions will schedule and present annual refresher training for residents regarding the subjects of zero tolerance and incident reporting processes.</p> <p data-bbox="240 1299 1457 1395">Central Office Staff: The agency head response to, has the agency established procedures to provide residents with disabilities and residents who are limited English proficient equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment?</p> <p data-bbox="240 1424 1476 1520">Response: Yes, all written PREA information is translated into multiple languages including those most common among our population – Spanish and Somali. Individuals with disabilities are provided PREA information in a manner consistent with ADA. Intake officers check for understanding upon admittance to the facility.</p> <p data-bbox="240 1550 1437 1610">These procedures are all outlined in the PREA, Institutional Reporting and Responding Maltreatment and Sexual Abuse policy and procedures to include the following:</p> <ul data-bbox="240 1639 1479 1792" style="list-style-type: none"> • Residents’ who have limited English proficiency and/or any physical or cognitive impairment which may impact their ability to report sexual abuse/harassment must be provided with assistance. • Only Hennepin County certified interpreters will be accepted as reporters on behalf of limited English proficiency residents. Use of residents as interpreters or for reporting or communicating written policy to other residents is prohibited. <p data-bbox="240 1821 347 1848">115.33 (b)</p> <p data-bbox="240 1877 1466 1973">Within 30 days of intake, the agency shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents.</p> <p data-bbox="240 2002 1428 2063">DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (E1), Orientation Content: (1) Provide a comprehensive, age-appropriate educational format including, but not limited to:</p> <ul data-bbox="240 2092 1058 2152" style="list-style-type: none"> • DOCCR’s zero-tolerance policy regarding sexual abuse and sexual harassment; • How to avoid risk situations related to sexual assault;

- How to safely report rape or sexual activity;
- How to obtain counseling services and/or medical assistance if victimized;
- The risks and potential consequences for engaging in any type of sexual activity while incarcerated;
- DOCCR's sexual abuse response policies and procedures.

Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, when you came here, were you told about:

- Your right to not be sexually abused or sexually harassed? Fourteen (14) indicated yes.
- How to report sexual abuse or sexual harassment? Sixteen (16) indicated yes.
- Your right not to be punished for reporting sexual abuse or sexual harassment? Fourteen (14) indicated yes.

115.33 (c)

Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards, and shall 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.

Informal interviews indicated that all residents have received the required PREA training.

See section (a)

115.33 (d)

The agency shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (5) indicates resident education will be designed to be age appropriate and will be delivered in formats accessible to all residents, including those who have limited proficiency, hearing or visual impairments, or are otherwise disabled. This also includes residents who have limited reading skills.

115.33 (e)

The agency shall maintain documentation of inmate participation in these education sessions.

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (E2) indicates that document resident participation in these education sessions. Maintain documentation per documentation standards.

The auditor reviews the resident's Prison Rape Elimination Act Orientation Information with residents and staff signatures.

The documentation include:

Hennepin County Adult Correction Facility has a zero tolerance towards sexual assault, sexual misconduct, staff sexual misconduct and sexual harassment. This includes any sexual act, holding, comments or gestures.

If you are a victim of sexual assault, sexual misconduct, sexual harassment or staff sexual misconduct, you can report it in one of the following ways:

- Notify a staff member
- Tell your case manager or community probation officer
- Contact the Correctional Institution Supervisor (CIS) for Men's Section or Women's Section
- Report it directly to the police
- Third Party Report (someone other than you)
- Anonymously (kite, letter, etc.)

If you are in need of counseling, please notify staff so they can assist you. If you want to receive confidential counseling you can contact the following agency:

Sexual Violence Center (SVC)
 24-hour Crisis Hotline
 (612) 871-5111
www.sexualviolencecenter.org

115.33 (f)

In addition to providing such education, the agency shall ensure that key information is continuously and readily available or visible to inmates through poster, inmate handbooks, or other written formats.

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (E3) indicates that the facility ensure that key information is continuously and readily available or visible to clients/residents through posters, client/resident handbooks and pamphlets.

The auditor observed PREA posters, pamphlets and handbooks.

Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, when you first came here, did you get information about the facility's rules against sexual abuse and harassment? All residents stated that they received PREA information.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1477 723" style="list-style-type: none"> • Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020 • Hennepin County Sheriff's Office PREA Policy 904 • DOCCR Administration Policy: Professional Standards and Conduct Investigations • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals • DOCCR Administrative Policy: Professional Standards and Conduct Investigations • DOCCR Administrative Policy: Professional Standards and Conduct, Incident Intake and Triage • Special Training Certificates for Investigators (#All at Facility) • Training Transcripts • NIC PREA Training for Investigators Certificates (Investigating Sexual Abuse in Confinement Settings – The Moss Group) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 757 347 784">115.34 (a)</p> <p data-bbox="240 817 1485 904">In addition to the general training provided to all employees pursuant to standard 115.31, the agency shall ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.</p> <p data-bbox="240 938 1410 996">DOCCR Policy Prison Rape Elimination Act (PREA) section (11) indicates that investigators are trained in conducting investigations in confinement settings.</p> <p data-bbox="240 1030 1477 1088">Documentation review, Investigating Sexual Abuse in Confinement Settings: Training for Correctional Investigators National Corrections Academy Training which includes the required topics.</p> <p data-bbox="240 1122 347 1149">115.34 (b)</p> <p data-bbox="240 1182 1477 1270">Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p data-bbox="240 1303 1453 1496">They could discuss the contents of the training that included the areas and topics required by the PREA Standards for specialized training for investigators in conducting sexual abuse investigations in confinement settings. DOCCR Policy, Prison Rape Elimination Act (PREA), Paragraph 11, and DOCCR Professional Standards and Conduct, requires that investigators are trained in conducting investigations in confinement settings. DOCCR Policy, Professional Standards and Conduct, Policy, #2., requires that Department investigation, will be conducted only by DOCCR approved and trained investigators.</p> <p data-bbox="240 1529 1485 1789">Hennepin County Sheriff's Office Policy 904.6, Investigations, require sexual abuse investigations to be conducted by investigators who have received office-approved special training. The same is stated in a MOU between the DOCCR and the Hennepin County Sheriff's Office. This facility has a training matrix to document the PREA training the PREA Standards and the Agency require, including specialized training, required for each of the different job classes. The matrix identified the training required for investigators and that included techniques for interviewing adult and juvenile sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case of administrative or prosecution referral. The training block documented for that training is NIC/Investigative Training</p> <p data-bbox="240 1823 1477 1910">Central Office Staff: The investigation manager indicated that investigators have receive training specific to conducting sexual abuse investigations in confinement settings. The investigator also indicated that investigators go through the PREA Resource Centers 9 modules on Investigating Sexual Abuse in Confinement settings.</p> <p data-bbox="240 1944 347 1971">115.34 (c)</p> <p data-bbox="240 2004 1426 2063">The agency shall maintain documentation that agency investigators have competed the required specialized training in conducting sexual abuse investigations.</p> <p data-bbox="240 2096 1477 2154">The agency provided documentation of the employee's name and employee's number (computerized) as documentation of completion of the required training.</p>

115.34 (d)

Any State entity or Department of Justice component that investigates sexual abuse in confinement settings shall provide such training to its agents and investigators who conduct such investigations.

See section (c).

115.35	Specialized training: Medical and mental health care
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Supporting Information:</p> <ul data-bbox="242 329 1123 723" style="list-style-type: none"> • DOCCR Policy: Prison Rape Elimination Act, PREA • DOCCR Procedures: Prison Rape Elimination Act, PREA • Medical Staff Training Spread Sheet • Medical Staff Training Acknowledgements (#All) • Mental Health Staff Training Acknowledgments (#All) • Mental Health Staff Training Roster • Medical Staff Training Roster • Centurion Power Point Presentation – Specialized Training • Master Training Roster (Including all training topics for all staff, including Centurion) • Centurion Training Roster Documenting PREA Training (101) and Specialized Training • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 754 349 784">115.35 (a)</p> <p data-bbox="242 813 1430 873">The agency shall ensure that all full and part time medical and mental health care practitioners who work regularly in its facilities have been trained in:</p> <ul data-bbox="242 902 1265 1030" style="list-style-type: none"> • How to detect and assess signs of sexual abuse and sexual harassment; • How to preserve physical evidence of sexual abuse; • How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and • How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. <p data-bbox="242 1059 1449 1120">DOCCR Policy Prison Rape Elimination Act sections (1,10 and 12) indicates that employees, volunteers, and contractors must comply with the provisions of the PREA and Minnesota State Statutes.</p> <p data-bbox="242 1149 1287 1178">(10) Employees, volunteers, and contractors must complete all PREA training as direct by their manager.</p> <p data-bbox="242 1207 1489 1267">(12) All full and part-time medical and mental health practitioners who work regularly in DOCCR facilities are trained in PREA requirements.</p> <p data-bbox="242 1299 349 1328">115.35 (b)</p> <p data-bbox="242 1357 1430 1417">If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations.</p> <p data-bbox="242 1447 1386 1476">The forensic examinations are not conduct by facility staff or contractors. They are conducted at the local hospitals.</p> <p data-bbox="242 1505 352 1534">115.35 (C)</p> <p data-bbox="242 1563 1481 1624">The agency shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.</p> <p data-bbox="242 1653 1211 1682">The facility provided a training list of teaches and nurses with all of the online training to included:</p> <ul data-bbox="242 1711 1032 1839" style="list-style-type: none"> • Mandated Reporting 2021 • PREA 101 2021 • PREA Review and Acknowledgement 2021 • PREA: Effective Professional Communication w/LGBTI Resident/Clients 2021 <p data-bbox="242 1868 349 1897">115.35 (d)</p> <p data-bbox="242 1926 1469 1986">Medical and mental health care practitioners shall also receive the training mandated for employees under standard 115.31 or for contractors and volunteers under standard 115.32, depending upon the practitioner’s status at the agency.</p> <p data-bbox="242 2016 432 2045">See standard (31).</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1174 689" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Objective Classification • DOCCR Adult Corrections Facility Procedures: Objective Classification • DOCCR Administration Policy: PREA, Resident Receiving and Orientation, Institutions • DOCCR Administration Procedures: PREA, Resident Receiving and Orientation, Institutions • Computerize Assessment System – PREA Victimization and PREA Predator • Victimization/Abusiveness Initial Assessments - males • Victimization/Abusiveness Initial Assessments - females • Victimization/Abusiveness Reassessments - males • Victimization/Abusiveness Reassessments - females • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 723 347 750">115.41 (a)</p> <p data-bbox="240 779 1469 840">All inmates shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates.</p> <p data-bbox="240 869 1493 965">DOCCR Objective Classification Policy section (6), an objective assessment will be administered during the screening intake process to assess all residents within the first 72 hours of incarceration and upon transfer to another facility to determine their risk of being sexually abused by other residents or sexually abusive toward other residents.</p> <p data-bbox="240 994 1465 1055">Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, when you first came here, do you remember whether you were asked any questions like:</p> <ul data-bbox="240 1084 1485 1245" style="list-style-type: none"> • Whether you had been in jail or prison before? Sixteen (16) indicated yes. • Whether you have ever been sexually abused? Sixteen (16) indicated yes. • Whether you identify with being gay, lesbian, or bisexual? (16) indicated yes. • Whether you think you might be in danger of sexual abuse here? Ten (10) indicated yes, and six (6) could not remember or was not sure. <p data-bbox="240 1279 347 1305">115.41 (b)</p> <p data-bbox="240 1335 1054 1361">Intake screening shall ordinarily take place within 72 hours of arrival at the facility.</p> <p data-bbox="240 1391 1430 1451">DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (B2) indicates the facility conduct intake interview within 72 hours of a resident's arrival at the facility.</p> <p data-bbox="240 1485 347 1512">115.41 (c)</p> <p data-bbox="240 1541 1034 1568">Such assessments shall be conducted using an objective screening instrument.</p> <p data-bbox="240 1597 1445 1657">The facility uses the Sexual Predator/Vulnerability PREA Screening Checklist as its objective screening instrument alone with the Victimization/Abusiveness Initial Assessments for males and females.</p> <p data-bbox="240 1691 347 1718">115.41 (d)</p> <p data-bbox="240 1747 1449 1774">The intake screening shall consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization:</p> <ul data-bbox="240 1803 1401 2130" style="list-style-type: none"> • Whether the inmate has a mental, physical, or developmental disability; • The age of the inmates; • The physical build of the inmate; • Whether the inmate has previously been incarcerated; • Whether the inmate's criminal history is exclusively nonviolent; • Whether the inmate has prior convictions for sex offenses against an adult or child; • Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; • Whether the inmate has previously experienced sexual victimization; • The inmate's own perception of vulnerability; and • Whether the inmate is detained solely for civil immigration purposes?

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (B3) indicates at a minimum criterion for screening residents:

- Prior acts of sexual abuse and prior convictions for violent offenses;
- Any gender non-confirming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse;
- Current charges and offense history;
- Age;
- Level of emotional and cognitive development;
- Physical size and stature;
- Mental illness;
- The residents own perception of vulnerability;
- Mental, physical or developmental disability;
- Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

Procedures caution that determination of sexually abusive behavior should not be solely on whether the resident is lesbian, gay, bisexual, transgender or intersex. Paragraph 2, Intake Staff Procedures, of DOCCR policy, requires staff conduct an objective risk assessment within 72 hours of the time the resident is admitted to the facility.

A review of the Sexual Predator/Vulnerability PREA Screening Checklist include but not limited to:

Possible Victim Factors:

- Former victim of prison rape or sexual assault within the past ten years
- Youthful age (under 25)
- Elderly (65 or older)
- Small physical stature
- Developmental disability/mental health history/physical disability
- First time being incarcerated
- Homosexual/bi-sexual/transgender/overtly effeminate
- History of any sexual abuse (victim of) within the past ten years
- History of correctional facility consensual sex with the past ten years
- Have you been in protective custody within the past ten years and do you feel personally vulnerable with other inmates?

Possible Predator Factors:

- Institutional predatory sexual behavior within the past ten years
- Current or prior convictions for rape, child abuse or neglect within the past ten years
- Sexual abuse or sexual assault toward others or domestic violence within the past ten years
- Current gang affiliation
- Institutional strong-arming/assaults within past ten years
- Institutional consensual sex within the past ten years
- Institutional sexual taunting toward staff or offenders within the past ten years
- Overtly masculine (Females only)

The OMS included sections on:

- Assessment Type – PREA Assessment
- Section 1 – PREA Victimization – Assessment Reason
- Section 2 – PREA Predator – Assessment Reason

115.41 (e)

The initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive.

DOCCR Objective Classification Policy section (1-4), All men and women housed at the ACF for five consecutive days or more will undergo an objective classification process to determine his or her custody level, housing location, work assignment, and program track. (2) The classification process will include reviewing an individual's:

- Status (adult or juvenile);
- Offense category;
- Current charges, convictions, or both (severity);
- Serious offense history;
- Escape risk;
- Potential risk of safety to self and others;

- Institutional disciplinary history;
- Medical and mental health needs; and
- Special Management Unit housing status

(3) Residents completing the classification process will receive a custody level of "medium or minimum." (4) The classification process will provide an override function for reassessing and changing an individual's custody level.

115.41 (f)

Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (C.1-3), Reassess all adult facility residents within 30 days of the resident's arrival at a facility to capture any new information. (2) Rescreen residents when warranted due to a referral, request, or incident of sexual victimization. (3) Prohibit the disciplining of residents for refusing to answer particular questions or for not disclosing complete information on sexual abuse or sexual harassment.

The auditor reviewed reassess of males and females from the Offender Management System (OMS). The system included the inmate's name, screen: Inmate Notebook and Date/Time and author with the inmate notes or the reassessment.

115.41 (g)

An inmate's risk level shall be reassessed when warranted due to referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

See section (f).

115.41 (h)

Inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d-1, 7, 8, 9) of this section.

See section (f).

115.41 (i)

The agency shall implement 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.

DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (5b) strictly limit information related to sexual information or abusiveness that occurred in the institution to medical and mental health practitioners and other staff as necessary to inform treatments plans, and security and management decisions including housing, bed work, education and program assignments or as otherwise required by federal, state, or local law.

Central Office Staff: The agency PREA coordinator indicated that the agency outlined who should have access to an inmate's risk assessment within the facility in order to protect sensitive information from exploitation. Centurion conducts a confidential health assessment on every resident, facility intake staff keep intake interview information in an electronic database accessible to only designated staff.

Facility Staff: The facility PREA compliance manager responded to, has the agency outlined who should have access to an inmate's risk assessment within the facility in order to protect sensitive information from exploitation? The facility uses the classification team system to determine what staff have access to sensitive information on inmates.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1174 824" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Objective Classification • DOCCR Adult Corrections Facility Procedures: Objective Classification • DOCCR Administration Policy: PREA, Resident Receiving and Orientation, Institutions • DOCCR Administration Procedures: PREA, Resident Receiving and Orientation, Institutions • DOCCR Adult Corrections Facility Policy: Special Management Unit – MS • DOCCR Adult Corrections Facility Procedures: Special Management Unit -MS • DOCCR Adult Corrections Facility Policy: Special Management Unit – WS • DOCCR Adult Corrections Facility Procedures: Special Management Unit - WS • DOCCR SOP 04-11M – Special Management Unit – Men’s Section • DOCCR SOP04-11W – Special Management Unit – Women’s Section • SOP 04-10 Administrative Separation • DOCCR Policy 06-09, Access to Programs and Services • Computerize Assessment System – PREA Victimization and PREA Predator • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 857 347 884">115.42 (a)</p> <p data-bbox="240 913 1393 1008">The agency shall use information from the risk screening required by standard 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p data-bbox="240 1037 1453 1099">DOCCR Policy PREA, Resident Receiving and Orientation, Institutions section (2, 3 and 4) utilize the following guidelines when determining housing, and program assignments for transgender and intersex residents:</p> <ul data-bbox="240 1128 1201 1290" style="list-style-type: none"> • Review on a case-by-case basis • Make assignments with the intention of ensuring the inmate’s health and safety • Assess whether the housing assignment would present management and/or security problems • Take into serious consideration the inmate’s own views with respect to this or her own safety. • Reassess housing assignment and programming at least twice a year. <p data-bbox="240 1319 1461 1413">Facility Staff: The facility PREA compliance manager responded to, how does the agency or facility use information from risk screening during intake to keep inmates from being sexually victimized or being abusive? We flag them as a potential victim or predator in the OMS system. The information is used for housing decisions, programing, and other safety factors.</p> <p data-bbox="240 1442 347 1469">115.42 (b)</p> <p data-bbox="240 1498 1246 1525">The agency shall make individualized determinations about how to ensure the safety of each inmate.</p> <p data-bbox="240 1554 347 1581">115.42 (c)</p> <p data-bbox="240 1615 1465 1709">In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency shall consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether the placement would present management or security problems.</p> <p data-bbox="240 1738 1481 1868">DOCCR Policy Special Management Unit sections (12) indicates when deciding whether to assign a transgender or intersex resident to the men’s section or women section, and when making other housing and programing assignments, the ACF will consider on a case-by-case basis whether the placement would ensure the inmate’s health and safety, and whether the placement would present management or security issues.</p> <p data-bbox="240 1897 1481 2027">Facility Staff: The facility PREA compliance manager responded to, how does the agency or facility determine housing and program assignments for transgender or intersex inmates? The facility has a multi-disciplinary team that consist of the Superintendent, Program Manager, the Men’s and Women’s Section Managers, Medical Supervisor and Mental Health professionals. The team review each case to determine the right housing and programming on a case-by-case bases.</p> <p data-bbox="240 2056 347 2083">115.42 (d)</p> <p data-bbox="240 2112 1465 2139">Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each</p>

year to review any threats to safety experienced by the inmate

DOCCR Policy Special Management Unit sections (13) indicates placement and programming assignments for each transgender or intersex resident will be reassessed at least twice a year to review any threats to safety the resident may have experienced.

Facility Staff: The facility PREA compliance manager responded to, how often are placement and programming assignments for each transgender or intersex inmate reassessed to review any threats to safety experienced by the inmate? The facility has a standing meeting once per month to review the multidisciplinary team decisions to include transgender or intersex inmates.

115.42 (e)

A transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration.

Facility Staff: The facility PREA compliance manager responded to, are transgender or intersex inmates' views with respect to his or her own safety given serious consideration in placement and programming assignments? Yes.

See section (a).

115.42 (f)

Transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

DOCCR Policy Special Management Unit sections (14) indicates that transgender and intersex residents will be given the opportunity to shower separately from other residents.

Facility Staff: The facility PREA compliance manager responded to, are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes. In the men's section there is a private shower in each block and in the segregation unit. At the women's section there are only private showers.

115.42 (g)

The agency shall not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates.

DOCCR Policy Special Management Unit sections (15) indicates lesbian, gay, bisexual, transgender, or intersex residents will not be assigned to a housing unit solely on the basis of such identification or status, unless such placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such residents.

Central Office Staff: The agency PREA coordinator indicated that the facility does not have special housing unit (s) for lesbian, gay, bisexual, transgender, or intersex residents as per the PREA Resident Receiving an Orientation DOCCR Policy.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Special Management Unit – MS • DOCCR Adult Corrections Facility Procedures: Special Management Unit -MS • DOCCR Adult Corrections Facility Policy: Special Management Unit – WS • DOCCR Adult Corrections Facility Procedures: Special Management Unit - WS • DOCCR SOP 04-11M – Special Management Unit – Men’s Section • DOCCR SOP04-11W – Special Management Unit – Women’s Section • SOP 04-10 Administrative Separation • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.43 (a)</p> <p>Inmates at high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is not available alternative means of separation form likely abusers. If a facility cannot conduct such as assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>DOCCR Policy Special Management Unit sections (7) indicates a resident at risk for sexual victimization will not involuntarily be housed in Special Management (protective custody) unless an assessment of all available options is made, and it is determined that there is no alternative means to separate the individual from a likely abuser. Note: If an assessment cannot be conducted immediately, the resident may be housed involuntarily in Special Management for less than 24 hours during the assessment process, and the basis for concern for the resident’s safety and the reason why no alternative housing may be arranged will be thoroughly documented in writing in OMS.</p> <p>Facility Staff: The superintendent responded to; does agency policy prohibited placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are not available alternative means of separation abusers? Yes. The facility will only place an individual involuntarily separation if other attempts to seek alternative housing have failed or the classification recommends. Special Management and Objective Classification SOP.</p> <p>115.43 (b)</p> <p>Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:</p> <ul style="list-style-type: none"> • The opportunities that have been limited; • The duration of the limitation; and • The reasons for such limitations. <p>DOCCR Policy Special Management Unit sections (8) indicates a resident housed in Special Management for protective custody per PREA standards will have access to programs, privileges, education, and work opportunities to the extent possible. Limited or denied access will be documented to include the reason for and duration of the limitation.</p> <p>115.43 (c)</p> <p>The facility shall assign such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days.</p> <p>DOCCR Policy Special Management Unit sections (9) indicates a resident involuntarily housed in Special Management until an alternative means of separation from likely abusers may be arranged will not ordinarily be housed in Separation or Segregation longer than 30 days.</p> <p>115.43 (d)</p> <p>If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility shall clearly document:</p> <ul style="list-style-type: none"> • The basis for the facility's concern for the inmate's safety; and

- The reason why no alternative means of separation can be arranged.

DOCCR Policy Special Management Unit sections (11) indicates results from the PREA Risk Assessment will be applied to guide assignments for housing, work, education, and programs. The goal is to separate residents at high risk of sexual abuse from residents at high risk to be sexually abusive.

The ACF will make individualized determinations about how to best ensure each resident's safety.

115.43 (d)

Every 30 days, the facility shall afford each such inmate a review to determine whether there is a continuing need for separation from the general population.

DOCCR Policy Special Management Unit sections (10) indicates the status of each resident involuntarily housed in Special Management on protective custody status per PREA standards will be reviewed every 30 days to determine the need for continued separation from general population.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Adult Corrections Facility Policy: Resident Orientation • DOCCR Adult Corrections Facility Procedures: Resident Orientation • DOCCR Administration Policy: PREA, Resident Receiving and Orientation, Institutions • DOCCR Administration Procedures: PREA, Resident Receiving and Orientation, Institutions • MOU Sexual Violence Center – Centurion, Inc • Men's Section & Women's section Information and Guidelines for All Residents (Handbooks English and Spanish) • "End the Silence" Brochure Given to Residents • Multiple PREA Related Posters • Sexual Violence Center Contract Informational Posters • Residents • Incident Reports (#All) PREA related • Investigation Packages (#All) Past 12 months • Resident Acknowledgement Forms - males • Resident Acknowledgement Forms - females • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.51 (a)</p> <p>The agency shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation, by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>The agency has established policies requiring and established procedures allowing for, multiple internal ways for residents to report privately to agency officials about sexual abuse and sexual harassment; retaliation by other residents of staff for reporting sexual abuse and sexual harassment; and staff neglect or violation of responsibilities that may have contributed to such incidents. DOCCR Policy, Chapter 12, Prison Rape Elimination Act; PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse. Paragraph B of the policy establishes procedures for multiple internal ways for residents to report privately about sexual abuse and sexual harassment; retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Paragraph B.6 requires staff to inform residents that they may also report through multiple outside agencies and these include:</p> <ul style="list-style-type: none"> • Inspections and Enforcement Unit (address provided) • Sexual Violence Center (phone and address provided) • Hennepin County Professional, Standards and Conduct Unit • MN Department of Human Rights (address provided) YRTC Policy <p>PREA Reporting and Responding Process, Paragraph 5, Page 4, states that residents can make a report to the PS&C Hotline, staffed 24/7 and may make a confidential call to the Sexual Violence Center. These calls are confidential and staff are to give the resident privacy but maintain a line of sight with the resident. The residents may use the agency grievance procedures to report.</p> <p>Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, how can inmates privately report sexual abuse and sexual harassment, retaliation by other inmates or staff reporting sexual abuse and sexual harassment, or staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment? Staff reported that inmates can tell staff, their counselor, a family member, file grievance, pass a kite to staff, write to the Inspections Unit, call the hotline, etc.</p> <p>Interviewed Random and Target Residents: Sixteen residents interviewed, twelve (12) random and four (4) targets. The residents were asked, how would you report any sexual abuse or sexual harassment that happened to you or someone else at this facility? All resident indicated one or more ways of reporting, such as tell staff, counselor, medical staff, use the hotline, writing a grievance, tell a family member or friend.</p>

115.51 (b)

The agency shall also provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detailed solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

The agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. DOCCR Policy, PREA Reporting and Responding Process provides these agencies for residents to contact: • To the PS&C Hotline 24/7 (number provided) • To the SVC (Confidential Call, number provided) Procedures state that calls to these agencies are confidential, however the resident may also volunteer information to staff about the abuse. Paragraph B.10 requires these ways for residents to report incidents: • Directly, verbally to staff • In writing • Through the Sexual Violence Center hotline • Contacting a supervisor to arrange for a court-certified interpreter Residents are given the brochure, "End the Silence". This brochure tells the resident "Who Can Help" if the resident is the victim of abuse. Discussed are "trustworthy adults" and these include talking to a facility staff member, counselor, teacher or medical professional, youth's attorney, probation officer, parent, guardian or other family member and through the facility grievance process

Agency Policy, PREA Reporting and Responding Process requires that residents detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Facility Staff: The facility PREA compliance manager responded to, how does the facility provide at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency? They can use the hotline number, report to a family member or the lawyer.

115.51 (c)

Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

DOCCR Policy PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse (A1) indicates Staffing Reporting, staff are required to report the following immediately to a supervisor:

- Any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a confinement setting, whether or not it is part of Hennepin County.
- Retaliation against residents or staff who reported an incident.
- Staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse/sexual harassment or retaliatory behaviors.

Informal staff interviews indicated that all verbally reports must be documented by the end of the shift.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, when an inmate alleges sexual abuse or sexual harassment, can he or she do so verbally, in writing, anonymously, and from third parties? All staff indicated yes and stated that they would have to document by the end of the shift.

115.51 (d)

The agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates.

DOCCR Policy PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse (A2-3), provide a private reporting mechanism to report sexual abuse and sexual harassment of residents. (3) Reports of sexual abuse and/or harassment can be made privately by contacting the following agencies:

- Attn: Inspections and Enforcement Unit (1450 Energy Park Drive, Suite 200 St. Paul, MN 55108)
- Sexual Violence Center (3757 Fremont Avenue North, Minneapolis MN 55412)
- Professional Standards and Conduct Unit (701 Fourth Avenue South, Suite 1060 MC: L802 Minneapolis, MN 55415)

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, how can staff privately report sexual abuse and sexual harassment of inmates? All staff indicated that they could report to their supervisor, or facility management, call investigator or call the Sexual Violence Center hotline.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	<p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 502 297">Supporting Information:</p> <ul data-bbox="242 331 1437 723" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Investigations Spread Sheet • Resident Handbook (English) • Resident Handbook (Spanish) • Grievances Filed in Past 12 Months (#All) • Grievances Filed in Past 12 that were PREA Related (#All) • Investigation Packages (#All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 757 347 784">115.52 (a)</p> <p data-bbox="242 817 1449 875">An agency shall be exempt from this standard if it does not have administrative procedures to address inmate grievances regarding sexual abuse.</p> <p data-bbox="242 909 1401 967">DOCCR Policy Resident Grievance and Complaint Procedures establish procedures for receiving, investigating, and documenting results of resident complaints and grievances.</p> <p data-bbox="242 1001 347 1028">115.52 (b)</p> <ul data-bbox="242 1061 1481 1312" style="list-style-type: none"> • The agency shall not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. • The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege and incident of sexual abuse. • The agency shall not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. • Nothing in this section shall restrict the agency's ability to defend against an inmate lawsuit on the ground that applicable status of limitations has expired. <p data-bbox="242 1346 1485 1507">The facility has not imposed a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse. DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, E. Administrative Remedy Process, provides the policy and procedures for handling grievances, including third party grievances filed on behalf of a resident. Paragraph 12.a, provides that grievances involving allegations of sexual abuse have no time limits to be filed. It also allows a grievance involving sexual abuse to be filed without having to go through an informal process.</p> <p data-bbox="242 1541 347 1568">115.52 (c)</p> <p data-bbox="242 1601 539 1628">The agency shall ensure that:</p> <ul data-bbox="242 1662 1485 1742" style="list-style-type: none"> • An inmate who alleges sexual abuse may submit a grievance with without submitting it to a staff member who is the subject of the compliant, and • Such grievance is not referred to a staff member who is the subject of the compliant. <p data-bbox="242 1776 1485 1870">The facility procedures require staff to ensure that grievance is not referred to the staff who is the subject of the complaint for resolution. This policy also allows a resident filing a grievance related to sexual abuse to file it by putting it him/herself in "the" locked medical box on the mod to be collected by medical staff and submitted to the facility PREA Compliance Manager</p> <p data-bbox="242 1904 347 1930">115.52 (d)</p> <ul data-bbox="242 1964 1481 2154" style="list-style-type: none"> • The agency shall 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 shall not include time consumed by inmates in preparing any administrative appeal. • The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the inmate in writing of any such extension and provide a date by which a decision will be made.

- 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, the inmate may consider the absence of a response to be a denial at that level.

115.52 (e)

- Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing request for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.
- If a third-party file such a request on behalf on an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.
- If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision.

115.52 (f)

- The agency shall establish procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse.
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

The grievance will not be conditioned upon the resident agreeing to have the request filed on his/her behalf. The procedures for filing an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse requires the grievance to be forwarded to a level of review at which corrective action may be taken and an initial response if required within 48 hours.

A completed final agency decision will be made within 5 calendar days.

DOCCR Policy PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, establishes procedures for filing an emergency grievance where a resident is subject to a substantial risk of imminent sexual abuse. Emergency grievances are immediately forwarded to a level of review at which corrective action may be taken.

115.52 (g)

The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmates filed the grievance in bad faith.

Informal staff interview indicated that the facility does not discipline an inmate for filing a grievance related to alleged sexual abuse.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1437 790" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • MOU Sexual Violence Center • PREA Brochure • Sexual Abuse is Not Part of Your Sentence • Resident Handbook • Resident Handbook (Spanish) • Documentation of Residents Accessing Outside Services • PREA Brochure “End the Silence”, With Contact Information for SVC • Multiple Posters • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 824 347 851">115.53 (a)</p> <p data-bbox="240 884 1461 1039">The facility shall 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible.</p> <p data-bbox="240 1072 1430 1131">The facility provided the auditor with a civil immigration book order from the Secretary of the Unit States with all contact information by states.</p> <p data-bbox="240 1164 1493 1420">DOCCR Policy Resident Grievance and Complaint Procedures establish procedures section (E1-4), Providing Access to Outside Victim Advocates (1) inform the resident that he or she may contact an outside agency for confidential emotional support services for sexual assault victims and that such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities per mandatory reporting laws. (2) Provide the resident with the address and phone number to the Sexual Violence Center. The SVC phone is answered seven days a week, 24 hours a day. (3) Refer the resident to Contracted Medical Services for a consultation with the mental health professional. (4) Encourage the resident to seek support from a trusted friend, family member, or staff member with whom he or she feels is comfortable to talk about the assault.</p> <p data-bbox="240 1453 347 1480">115.53 (b)</p> <p data-bbox="240 1514 1461 1572">The facility shall 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.</p> <p data-bbox="240 1606 400 1632">See section (a).</p> <p data-bbox="240 1666 347 1693">115.53 (c)</p> <p data-bbox="240 1727 1461 1809">The agency shall 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. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.</p> <p data-bbox="240 1843 1469 1901">DOCCR Policy Resident Grievance and Complaint Procedures section (2) Provide the resident with the address and phone number to the Sexual Violence Center (SVC).</p> <p data-bbox="240 1935 1469 2063">The facility provided a MOU between the Hennepin County Department of Community Corrections and Rehabilitation, Sexual Violence Center and Centurion, inc. The reviewed MOU and interviews with staff from the Sexual Violence Center confirmed the Sexual Violence Center provides direct services to victims of sexual violence who are at least twelve years of age or older. Services are free and include the following:</p> <ul data-bbox="240 2096 595 2154" style="list-style-type: none"> • 24-hour crisis line; • Support during evidentiary exams

- Support groups
- 1:1 counseling
- Legal advocacy
- Personal advocacy
- Assistance with filing for reparations
- Accompaniment to court/law enforcement

Centurion (contracted Healthcare Provider) will provide, on a regular and continual basis (7 days/week, 24 hours/day) professional medical, dental, mental health and other related health care and administrative services for the residents in the county facilities and programs. The services include emergency medical care as well as mental health and psychiatric services.

115.54	Third-party reporting
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Supporting Information:</p> <ul data-bbox="242 329 1437 589" style="list-style-type: none"> • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Website Instructions for Reporting Incidents of Sexual Abuse, Sexual Misconduct of Sexual Harassment and Investigation • Incident Reports (# All) • Investigation Packages (# All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 620 349 649">115.54 (a)</p> <p data-bbox="242 678 1398 739">The agency shall establish a method to receive third party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate.</p> <p data-bbox="242 768 1476 927">The DOCCR Policy, Zero Tolerance of Sexual Abuse, Sexual Misconduct and Sexual Harassment, Reporting of Allegations of Sexual Abuse, Sexual Misconduct and Sexual Harassment, State’s residents may make reports verbally, in writing, anonymously, and through third parties. It also provides that an allegation can be made on behalf of a resident by a third-party in paragraph c. Policy requires staff to accept third-party reports.” End the Silence” brochures are in the lobby to be available to visitors.</p> <p data-bbox="242 958 1484 1153">That brochure talks about “Who Can Help” and if identifies, “many adults who may visit you in the facility. These may make reports for the resident. Additionally, the brochure has a paragraph entitled: “What if I see or hear about someone else being abused?”. That paragraph ends with a statement “you can help by reporting abuse”. Phone numbers for the Sexual Violence Center and the Hennepin County Department of Community Corrections and Rehabilitation, Performance, Standards and Conduct Unit are provided. Phone numbers are provided for third parties to make reports. Brochures are provided in multiple languages representing the most common languages in the Hennepin County area.</p> <p data-bbox="242 1182 1489 1377">Policy requires the DOCCR Professional Standards & Conduct (PS&C) Unit will ensure that all allegations of sexual abuse from all sources, including third party and anonymous reports are reported, assessed, and/or investigated. The agency’s website provides contact information for any viewer to submit a report. In addition to an email address, the viewer is provided the phone number to report to the Office of Professional Standards and Conduct. Viewers are instructed that if the allegation is criminal, the viewer is instructed to contact the Hennepin County Sheriff’s Office and the phone number is provided. This was confirmed through observation of the agency’s website and a provided screen shot of the website.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Incident Reports (# All) • Investigation Packages (# All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.61 (a)</p> <p>The agency shall 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>DOCCR Policy, PREA Reporting and Responding Process, Reporting of Alleged Incident Occurring within the facility, requires staff, contractors and volunteers to report immediately to the on-duty Corrections Supervisor (CS), any knowledge, suspicion, or information regarding an alleged incident of sexual abuse, sexual misconduct and sexual harassment that occurred in the facility. This includes an allegation made on behalf of a resident by a parent and/or legal guardian or professional. They are also required to report staff neglect or violation of policy that may have contributed to an incident or retaliation. Specific instructions for reporting are provided in this policy as well. The agency's Prison Rape Elimination Act (PREA) Policy mandates that staff, volunteers, and/or contractors report any incidents of sexual abuse, sexual misconduct or sexual harassment immediately.</p> <p>DOCCR Policy PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, Prisons Rape Elimination Act, in section A., Staff Reporting, staff are mandated to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a confinement setting, whether or not it is a part of Hennepin County. Also, required to be reported by staff are retaliation against residents or staff who reported an incident and staff neglect or violations or responsibilities that may have contributed to an incident of sexual abuse/sexual harassment or retaliatory behaviors. In the same policy, the Division Manager/Designee is required in Paragraph A.2, to provide a private reporting mechanism to report sexual abuse and sexual harassment of residents. Procedures provided the contact information for four (4) separate entities enabling staff to privately report allegations, knowledge, suspicions of sexual abuse, sexual misconduct, sexual harassment or retaliation for reporting. Staff are instructed they are to follow established institutional policy and procedure and report any abuse of an individual under the age of 18 or a vulnerable adult to the state or local agency under applicable mandatory reporting laws.</p> <p>The Hennepin County PREA brochure for staff, entitled, "Preventing and Reporting Sexual Misconduct with Offenders" asserts that "all staff are required to immediately report any instances of sexual abuse, sexual misconduct and sexual harassment whether it be staff-to-offender or offender-to-offender. It then advises staff that they can report by: 1) Contacting their immediate supervisor; 2) Contacting their Division Manager; or 2) Contacting the Professional Standards and Conduct Unit (phone number provided). In red, staff are instructed to report directly to the PS&C if a staff member is involved. The Hennepin County PREA brochure for staff, "Preventing and Reporting Sexual Misconduct with Offenders" requires that "all reports are taken seriously and any report, whether it's made verbally, in writing, anonymously or by a third-party must be reported."</p> <p>Incident reports were detailed and documented the allegations as well as the actions taken upon becoming aware of the allegations or incidents. DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, Prison Rape Elimination Act, A. Staff Reporting, b. Requires staff to immediately report to a supervisor retaliation against residents or staff who reported an incident. The Hennepin County PREA brochure for staff entitled, "Preventing and Reporting Sexual Misconduct with Offenders", has a section related to protection from retaliation. It asserts that all DOCCR staff, volunteers and offenders will be protected from retaliation and retaliation monitoring is briefly discussed. See 115.361 (a)-1. To confirm this substandard the auditor reviewed the agency's policy, interviewed staff and youth and reviewed investigation reports containing incident reports written by staff becoming aware of the allegation or incident. DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, Prison Rape Elimination Act, in section A., Staff Reporting requires staff to report retaliation against residents or staff who reported an incident as well as any staff neglect or violations of responsibilities that may have contributed to an incident of sexual abuse/sexual harassment or retaliatory behaviors. Procedures of this same policy, in paragraph A.1.b and c., requires staff to report immediately to a</p>

supervisor retaliation against residents or staff who reported and incident and staff neglect or violations of responsibilities that may have contributed to an incident of sexual abuse/sexual harassment or retaliatory behaviors. Multiple mechanisms for reporting privately are provided as well.

Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, does the agency require all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation? All staff indicated that the agency required them to reported all incidents.

115.61 (b)

Apart from reporting to designated supervisors or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions.

115.61 (c)

Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services.

Medical and Mental Health Staff, although contracted, operated in tandem with facility staff and inform residents of their duty to report. Also institutionalized into the culture is that staff accept and report allegations they received from any source.

115.61 (d)

If the allege victim is under the age of 18 or considered a vulnerable adult under a state or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

115.61 (e)

The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators.

The facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports to the designated investigator.

Facility Staff: The superintendent responded to; are all allegations of sexual abuse and sexual harassment (including those from third-party and anonymous sources) reported directly to designated facility investigations? Yes. All are referred to the agency Professional Standards and Conduct Unit.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Investigations Spread Sheet • Grievances Filed in Past 12 that were PREA Related (#All) • Investigation Packages (# All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.62 (a)</p> <p>When an agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate.</p> <p>DOOCR Policy, PREA Reporting and Responding Process, requires that when the facility obtains information or discovers a resident is subject to a substantial risk of imminent sexual abuse, they will take immediate action to protect the residents. First Responders are required to separate the alleged perpetrator from the alleged abuser, by both sight and sound. The staff is also required to remain with the victim to provide safety and support and to protect evidence (addressed in the coordinated response plan).</p> <p>Central Office Staff: The agency head indicated when the facility learn that a resident is subject to a substantial risk of imminent sexual abuse what protective action does the agency take, she stated as outlined in the agency PREA Institution Reporting and Responding to Maltreatment and Sexual Abuse policy, staff will take immediate action to protect the resident upon learning there is a substantial risk of imminent sexual abuse.</p> <p>Custody staff will then work in collaboration with the onsite social worker, the juvenile bench, the resident, and appropriate family members to create and implement an appropriate safety plan for the resident's housing, schooling, programming, and other resource needs.</p> <p>Facility Staff: The superintendent responded to; when you learn that an inmate is subject to a substantial risk of imminent sexual abuse, what protective action does the facility take? The facility offers the individual protective custody and complete a mental health referral. The resident is provided information on services and ways to report allegations of abuse during orientation.</p> <p>Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, if you learn an inmate is at risk of imminent sexual abuse, what actions do you take to protect the inmate? All staff indicated that they would keep the inmate in sight until the superior is contacted with instructions.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Professional Standards and Conduct Notifications Checklist (# All) • Investigation Package (# All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.63 (a)</p> <p>Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.</p> <p>DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse, A.3., requires the Division Manager or designee to provide the PS&C a written report of allegations of any alleged abuse at another facility within 24 hours of learning of the allegation. The PREA Reporting and Responding Process, 01-11, requires in paragraphs 1 and 2, that the Superintendent or designee make the initial notification to the other facility Superintendent. The Superintendent will report all allegations of sexual abuse, sexual misconduct and sexual harassment that occurred in another facility in writing to the PS&C within 24 hours of receiving the allegation and document the notification to PS&C. PSC will send a follow-up written notice to the agency head of the facility where the alleged abuse occurred and any other appropriate notifications.</p> <p>Central Office Staff: The agency head indicated that yes, if another agency or facility within another agency refers allegations of sexual abuse or sexual harassment that occurred within one of your facilities, is there a designated point of contact. Allegations are handled in the same manner as all other PREA related allegations. Criminal investigations are referred to the Hennepin County Sheriff's Office. Administrative investigations are conducted by DOCCR's Office of Administrative Services, Professional Standards and Conduct Unit.</p> <p>Facility Staff: The superintendent responded to; what happens when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred in your facility? The information is sent to the Office of Professional Standards and Conduct Unit to investigate the allegation.</p> <p>115.63 (b)</p> <p>Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. An incident involving a resident who reported an allegation of sexual abuse while housed in another program confirmed the head of the sending program was notified within 24 hours of staff becoming aware of the incident and an investigation was initiated the same day.</p> <p>115.63 (c)</p> <p>The agency shall document that it has provided such notification.</p> <p>The agency documents that it has provided notifications.</p> <p>115.63 (d)</p> <p>The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p>DOCCR Policy, PREA Sexual Abuse Data Management, Procedures require, when receiving any allegation of alleged sexual abuse, the superintendent or designee will promptly report the allegation to the appropriate agency office. Then PS&C is required to document that appropriate date and time of notifications as outlined in PREA Standards 115.61</p> <p>PREA Reporting and Responding Process, Reporting of Alleged Incident Occurring Outside the facility or at Another Facility, Paragraph 1, requires any knowledge, suspicions, or information regarding an alleged incident of sexual abuse, sexual misconduct and sexual harassment that is staff-to-offender or offender to-offender in another facility will follow the same steps outlined in the procedures noted in "Reporting of Alleged Incident Occurring Within the facility", with additional actions</p>

required. Policy requires the PS&C to be notified, who will in turn ensure that an investigation is conducted into the allegation.
Policy requires the PS&C to be notified within 24 hours.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Staff Blue Card • Sexual Abuse Response (SAR) Checklist (# All) • First Responder Cards • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.64 (a)</p> <p>Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to:</p> <ul style="list-style-type: none"> • Separate the alleged victim and abuser; • Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; • If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and • If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. <p>Interviewed Random Staff: Fourteen (14) random staff was interviewed. Eleven (11) at the male units and three (3) at the female unit. Staff were asked, if you are the first person to be alerted that an inmate has allegedly been the victim of sexual abuse, what is your responsibility in that situation? All staff basely reported, separate the victim and abuser, preserve the crime scene, protect the physical evidence by not letting the victim or abuser washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating.</p> <p>Interviewed Target Residents: Four (4) target residents were interviewed. Two (2) were residents who reported sexual abuse. The residents were asked, do you feel that staff who first got to the scene after you had been sexually abused responded quickly? Both residents indicated yes, when it was reported it.</p> <p>115.64 (b)</p> <p>If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • PREA Coordinated Response Plan • Supervisor Sexual Abuse Response Checklist • First Responder Card • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.65 (a)</p> <p>The facility shall develop a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>The Hennepin County Department of Community Corrections and Rehabilitation Adult Corrections Facility PREA Coordinated Response Plan. Review of the coordinated response plan included eight steps. The plans coordinate among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Facility Staff: The superintendent responded to; does the facility have a plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • Agreement Between Hennepin County and Minnesota Teamsters Public and Law Enforcement Employees Union #A165582 • Agreement Between Hennepin County and Hennepin County Supervisors Association #A165500 • Agreement Between Hennepin County and General Service Unit #A199540 • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.66 (a)</p> <p>Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf shall enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The auditor did not see any language in the reviewed contract that prevented the agency from removing from contact with residents, any staff who is alleged to have violated any agency/facility sexual abuse policy.</p> <p>115.66 (b)</p> <p>Nothing in this standard shall restrict the entering into or renewal of agreement that govern:</p> <ul style="list-style-type: none"> • The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of standards 115.72 and 115.76; or • Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination that the allegation of sexual abuse is not substantiated. <p>Staff indicated that there is nothing in any contract with employees as the result of collective bargaining, that would prevent the facility from taking appropriate action, including the removal of a staff during an investigation. The staff would be placed on administrative leave with pay after consulting with supervisors and human resources.</p> <p>Central Office Staff: The agency head indicated that she can verify that the agreements permit the agency to remove alleged staff sexual abusers form contact with any resident pending an investigation or a determination of whether and to what extent discipline is warranted.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1437 488" style="list-style-type: none"> • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administration Procedures: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • Retaliation Monitoring Process • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 521 347 548">115.67 (a)</p> <p data-bbox="240 577 1401 672">The agency shall establish 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, and shall designate which staff members or departments are charged with monitoring retaliation.</p> <p data-bbox="240 701 1485 996">DOCCR Policy, Prison Rape Elimination Act (PREA) in paragraph 6 and DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse prohibits staff, volunteers, interns, and/or contractors from retaliating against a client/resident or fellow staff member who makes an allegation of sexual abuse. Retaliatory behavior will result in disciplinary action up to and including dismissal. PREA Reporting and Responding Process Policy, in paragraph 7. States the facility has in place a Retaliation Monitoring Process to ensure compliance and protection for staff and residents from retaliation. The Department of Community Corrections and Rehabilitation Retaliation Monitoring Process, requires the PREA Compliance Manager to assign each incident to a retaliation monitor. If the incident requires monitoring staff activity, the Division's PREA Compliance Manager will be designated to monitor retaliation and if the incident requires monitoring a resident the PCM may designate the monitoring of retaliation to a corrections supervisor or above.</p> <p data-bbox="240 1025 1485 1153">Central Office Staff: The agency head indicated that she would protect residents and staff from retaliation for sexual abuse or sexual harassment allegations. Policies and procedures exist dictating prohibitions on retaliation. The facility follows the PREA retaliation monitoring process to ensure the safety of anyone who may participate in an investigation. All staff are trained in such and discipline is imposed should retaliation occur.</p> <p data-bbox="240 1182 347 1209">115.67 (b)</p> <p data-bbox="240 1238 1481 1332">The agency shall 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.</p> <p data-bbox="240 1361 1485 1556">Central Office Staff: The agency head indicated that if an individual who cooperates with an investigation expresses a fear of retaliation, the agency takes measures to protect that individual against retaliation. In collaboration with the affected individual, a plan will be developed to protect that individual. Plans include a retaliation monitor and can also include such things as temporary change in housing, programming, schooling when the individual is a resident. It can include such things as temporary change in job duties or assignment when that individual member. Care is taken to avoid reassign those who may engage in retaliatory behavior.</p> <p data-bbox="240 1585 1485 1713">Facility Staff: The superintendent responded to; for allegations of sexual abuse or sexual harassment, can you describe the different measures you take to protect inmates and staff from retaliation? Keep separates in OMS, designate a supervisor to monitor, grievance, re-assign staff, Kiosk and kites to file concerns, Special Management, staff grievance, performance, housing change.</p> <p data-bbox="240 1742 347 1769">115.67 (c)</p> <p data-bbox="240 1798 1449 1993">For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.</p> <p data-bbox="240 2022 1481 2150">The agency has promulgated a retaliation monitoring process in the Hennepin Department of Community Corrections and Rehabilitation Retaliation Monitoring Process. The process requires that the monitoring activity will be for a minimum of 90 days per the PREA Standards. The procedures require that on day one the retaliation monitor will check-in with the resident or staff verbally to determine if the resident or staff has any concerns.</p>

115.67 (d)

In the case of inmates, such monitoring shall also include periodic status checks.

The monitor will review resident individual journals, shift logs, daily logs, incident reports and any housing or programming changes to monitor the conduct and treatment of the resident. For staff the monitor will daily monitor and review shift assignments, duty logs and any conference notes or performance reviews that are produced or conducted during the 90- day monitoring period. Weekly, the designated Retaliation Monitor will check in with the resident or staff verbally each week. Daily and weekly monitoring are required to be documented. Step four (4) of the Retaliation Monitoring Plan requires that if retaliation occurs, the designated retaliation monitor will report this information to the PREA Compliance Manager and in Step five (5) will document the allegation/retaliation on the Professional Standards and Conduct Incident Report and refer the allegation of retaliation to PS&C for Investigation.

115.67 (e)

If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.

See section (c) response.

115.67 (f)

An agency's obligation to monitor shall terminate if the agency determines that the allegation is unfounded.

The Department of Community Corrections and Rehabilitation Retaliation Monitoring Process in steps 9 and 10 requires if during the 90- day monitoring process new information arises; the designated Retaliation Monitor will continue monitoring for an additional 30 days. The process is the same for staff as for residents with regard to steps 9 and 10. If no additional information arises during the monitoring period, the designated Retaliation Monitor will conduct a final check-in and documentation review at 30 days. Upon completion of documentation, the designated Retaliation Monitor will discontinue monitoring. PREA Reporting and Responding Process requires the agency to continue monitoring beyond 90 days if the initial monitoring indicates a continuing need.

115.68	Post-allegation protective custody
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Supporting Information:</p> <p data-bbox="242 329 979 358">DOCCR Adult Corrections Facility Policy: Special Management Unit – MS</p> <ul data-bbox="242 387 1043 680" style="list-style-type: none"> • DOCCR Adult Corrections Facility Procedures: Special Management Unit -MS • DOCCR Adult Corrections Facility Policy: Special Management Unit – WS • DOCCR Adult Corrections Facility Procedures: Special Management Unit - WS • DOCCR SOP 04-11M – Special Management Unit – Men's Section • DOCCR SOP04-11W – Special Management Unit – Women's Section • SOP 04-10 Administrative Separation • DOCCR Policy, Professional Standards and Conduct Investigations • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 710 349 739">115.68 (a)</p> <p data-bbox="242 768 1442 831">Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to the requirements of standards 115.43.</p> <p data-bbox="242 860 1484 1055">DOCCR Policy Special Management Unit sections (7) indicates a resident at risk for sexual victimization will not involuntarily be housed in Special Management (protective custody) unless an assessment of all available options is made, and it is determined that there is no alternative means to separate the individual from a likely abuser. Note: If an assessment cannot be conducted immediately, the resident may be housed involuntarily in Special Management for less than 24 hours during the assessment process, and the basis for concern for the resident's safety and the reason why no alternative housing may be arranged will be thoroughly documented in writing in OMS.</p> <p data-bbox="242 1084 1442 1180">DOCCR Policy Special Management Unit sections (8) indicates a resident housed in Special Management for protective custody per PREA standards will have access to programs, privileges, education, and work opportunities to the extent possible. Limited or denied access will be documented to include the reason for and duration of the limitation.</p> <p data-bbox="242 1209 1477 1305">DOCCR Policy Special Management Unit sections (9) indicates a resident involuntarily housed in Special Management until an alternative means of separation from likely abusers may be arranged will not ordinarily be housed in Separation or Segregation longer than 30 days.</p> <p data-bbox="242 1335 1493 1431">DOCCR Policy Special Management Unit sections (11) indicates results from the PREA Risk Assessment will be applied to guide assignments for housing, work, education, and programs. The goal is to separate residents at high risk of sexual abuse from residents at high risk to be sexually abusive.</p> <p data-bbox="242 1460 1217 1489">The ACF will make individualized determinations about how to best ensure each resident's safety.</p> <p data-bbox="242 1518 1471 1615">DOCCR Policy Special Management Unit sections (10) indicates the status of each resident involuntarily housed in Special Management on protective custody status per PREA standards will be reviewed every 30 days to determine the need for continued separation from general population.</p> <p data-bbox="242 1644 1493 1803">Facility Staff: The superintendent responded to; does agency policy prohibited placing inmates at high risk for sexual victimization or who have alleged sexual abuse in involuntary segregated housing in lieu of other housing areas, unless an assessment has determined there are not available alternative means of separation abusers? Yes. The facility will only place an individual involuntarily separation if other attempts to seek alternative housing have failed or the classification recommends. Special Management and Objective Classification SOP.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020 • Hennepin County Sheriff's Office PREA Policy 904 • DOCCR Administration Policy: Professional Standards and Conduct Investigations • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals • DOCCR Administrative Policy: Professional Standards and Conduct Investigations • DOCCR Administrative Policy: Professional Standards and Conduct, Incident Intake and Triage • DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals • DOCCR First Responder Cards: First Responder Questions and DOCCR Sexual Abuse First Responder Check list • DOCCR Preventing and Reporting Sexual Misconduct with Residents – Brochure • DOCCR Adult Corrections Facility Procedures: Resident Grievance and Complaint • DOCCR Adult Corrections Facility Policy: Resident Grievance and Compliant • Hennepin County Duty Supervisor-Sexual Abuse Response Checklist (#All) • Mental Health Referral Forms In-House (# All) Past 12 Months – PREA Related • Investigations (#All) Past 12 Months • Incident Reports (#All) Past 12 Months • Investigation Referral: Performance Assessment (#All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.71 (a)</p> <p>When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.</p> <p>The Hennepin County Department of Corrections has a unit dedicated to conducting investigations. That entity is the Professional Standards and Conduct Unit (PS&C). It is staffed by the Senior Administrative Manager and five investigators, two of whom conduct background investigations. DOCCR, Professional Standard and Conduct: Investigations, requires the DOCCR Professional Standards and Conduct Unit (PS&C) to investigate allegations of employee misconduct as directed by Department Administration.</p> <p>Complaints involving criminal misconduct are to be immediately referred to law enforcement. The DOCCR has a Memorandum of Understanding with the Hennepin County Sheriff's Office confirming that the Sheriff's Office will conduct sexual abuse investigations. The Hennepin County Sheriff's Office Policy 904.5, Investigation, requires officers to promptly, thoroughly and objectively, investigate all allegations including third party and anonymous reports of sexual abuse and sexual harassment. Too, it affirms and requires that only investigators who have received approved special training will conduct sexual abuse investigations. The same policy requires that, when practical, an investigator of the same sex as the victim should be assigned to the case.</p> <p>Central Office Staff: The investigation manager responded to how long does it take to initiate an investigation following an allegation of sexual abuse or sexual harassment. The facility forwards all PREA allegations to DOCCRs Professional Standards & Conduct Unit within 24 hours of receiving the complaint. This generally happens at the end of the shift and less than 24 hours.</p> <p>Central Office Staff: The investigation manager responded to what would be the first steps in initiating an investigation and how long would they take. Communicating to facility staff is the first step. This triggers staff to complete a PREA check list and forward that information to PS&C within 24 hours of notice. If there is serious physical harm or a crime scene PS&C are notified immediately.</p> <p>Central Office Staff: The investigation manager describes the investigation process as; the process starts with the referral from the facility to PS&C. The compliant is reviewed to determine if the compliant is criminal or administrative. Any video evidence, reports and witness statements are reviewed as well as an interview of the complainant by PS&C. This occurs 72 hours after receiving the compliant form the facility. The investigation involves independent fact finding through interviewing evidence collection, system analysis and document review. Upon completion of the investigation a report is submitted for review by PS&C manager then sent to facility leadership for administrative review. All information and evidence collected for the case is retained by the PS&C unit.</p>

Central Office Staff: The investigation manager responded to, how do you handle anonymous or third-party reports of sexual abuse or sexual harassment. Are they investigated differently? Any 3rd party reports of a PREA allegation are handled exactly the same as above with consideration giving to any privacy concerns of the reporter.

115.71 (b)

Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations pursuant to standard 115.334.

The Hennepin County Sheriff's Office conducts investigations of allegations that appear to be criminal. The MOU between the Sheriff's Office and the DOCCR affirmed that any Hennepin County Sheriff's Office staff conducting a criminal investigation in a DOCCR facility would have to have completed the specialized training for Investigators: Conducting Sexual Abuse Investigations in Confinement Settings.

Administrative investigations are conducted by the Professional Standards and Conduct Unit. These investigators have completed the specialized training either conducted by the Moss Group, the National Institute of Corrections or through the curriculum provided by the Moss Group on the PREA resource center website.

115.71 (c)

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

The PREA investigation summaries include but not limited to:

- Complainant or Incident initiated
- Type of Incident
- PREA Standard
- Immediate Response
- Reports/Statements
- Interviews
- Video Review
- Documents Reviewed
- PREA Review Findings
- Mental Health Assistance Provided
- Complainant Notified
- PREA Incident Review Required

Central Office Staff: The investigation manager responded to describing circumstantial evidence you would be responsible for gathering in an investigation of an incident of sexual abuse. Any PREA complaints that represent a sexual assault with physical or DNA evidence would constitute a criminal investigation and the HCSO would collect or direct healthcare staff of collect such evidence. In administrative investigations the agency routinely collects video and audio related to the incident. Non-criminal physical items like clothing or broken items would be documented and photographed but the item itself would remain with the facility.

115.71 (d)

The agency shall not terminate an investigation solely because the source of the allegations recants the allegation.

Central Office Staff: The investigation manager indicated that the agency does not terminate an investigation solely because the source of the allegations recants the allegation. The investigation process continues.

115.71 (e)

When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.

Investigations are to be conducted promptly and continuously until completed and conducted without any bias related to the detainee's sexual orientation, sex, or gender identity. Investigators are instructed not to assume that any sexual activity is consensus.

Central Office Staff: The investigation manager responded to, when you discover evidence that a prosecutable crime may have taken place, do you consult with prosecutors before you conduct compelled interviews. PS&C consults with Hennepin County Law department on these issues where administrative and criminal investigations may co-exist. The PS&C unit does not conduct compelled testimony until after the criminal investigation in these cases.

115.71 (f)

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual as is and shall not be determined by the person's status as resident or staff. No agency shall require a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

Central Office Staff: The investigation manager responded to, on what basis do you judge the credibility of an alleged victim, suspect, or witness. Credibility of any complainant is assessed based on the existing circumstances of that incident. Credibility is not judged based on the status of the complainant as a resident or the suspect as an employee.

Central Office Staff: The investigation manager responded to, would you, under any circumstance, require a resident who alleges sexual abuse to submit to a polygraph examination or truth-telling device as a condition for proceeding with an investigation. No.

Interviewed Target Residents: Four (4) target residents were interviewed. Two (2) were residents who reported sexual abuse. The residents were asked, were you required to take a polygraph test as a condition for proceeding with a sexual abuse investigation? Both residents indicated no, they did not take a polygraph test for the investigation.

115.71 (g)

Administrative Investigations:

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

Central Office Staff: The investigation manager responded to, what efforts do you make during an administrative investigation to determine whether staff actions or failures to act contributed to the sexual abuse. The actions or inactions of any individual leading to a PREA incident are key factors that are determined during the investigation. This is established by speaking with witnesses, reviewing video footage, system analysis and document reviews.

Central Office Staff: The investigation manager responded to; do you document administrative investigations in written reports? What information do you include in those reports? The written reports of PREA allegations contains a detailed description of the allegation including how the allegation was made, written documentation, written statements, the detailed actions of all the participants, relevant PREA standards, the findings and rationale for those findings.

The PREA investigation summary report includes but not limited to:

- Complainant or Incident initiated
- Type of Incident
- PREA Standard
- Immediate Response
- Reports/Statements
- Interviews
- Video Review
- Documents Reviewed
- PREA Review Findings
- Mental Health Assistance Provided
- Complainant Notified
- PREA Incident Review Required

115.71 (h)

Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

The reviewed reports were comprehensive. The format for a typical report includes the following: 1) PS&C Intake Form, providing an incident summary, including the residents/staff involved; 2) PS&C Investigation Report; 3) PS&C Number/Incident Number; 4) Date referred; 5) Who initiated the complaint; 6) Type of incident; 7) Definitions of the PREA Standards; 8) Incident description; 9) [116] Immediate response; 10) Interviews (audit recorded); 11) Documents reviewed; 12) PREA review finding; 13) Rationale; 14) Next Steps; 15) Mental Health assistance provided; 16) Complainant notified; 17) PREA Incident Review Required (yes/no); 18) Notification; 19) YRTC Medical Referral Form (and referrals to mental health); 20) Incident Report; 21) Supervisor Sexual Abuse Response Checklist; and 22) Emails/correspondence. Allegations consistently revolved around inappropriate comments by residents directed toward residents.

Central Office Staff: The investigation manager responded to; are criminal investigations documented? What is contained in that report? The criminal case referral to Law Enforcement is documented and maintained by PS&C unit.

115.71 (i)

Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Central Office Staff: The investigation manager responded to, when do you refer cases for prosecution. Any PREA allegation that may constitute a criminal act is referred to the Hennepin County Sheriff's Office for prosecution.

115.71 (j)

The agency shall retain all written reports referenced in paragraphs (g) and (h) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years, unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention.

The PREA investigation summary report includes but not limited to:

- Complainant or Incident initiated
- Type of Incident
- PREA Standard
- Immediate Response
- Reports/Statements
- Interviews
- Video Review
- Documents Reviewed
- PREA Review Findings
- Mental Health Assistance Provided
- Complainant Notified
- PREA Incident Review Required

115.71 (k)

The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

Central Office Staff: The investigation manager responded to; how do you proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation into his/her conduct. The investigation and/or referral for criminal prosecution will continue, regardless of the suspect employment status.

Central Office Staff: The investigation manager responded to; how do you proceed when a victim who alleges sexual abuse or sexual harassment or an alleged abuser leaves the facility prior to a completed investigation into the incident. The investigation and /or referral for criminal prosecution will continue, regardless.

115.71 (l)

Any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

Central Office Staff: The investigation manager indicated that the Department of Justice component have not conducted investigations at this facility.

115.71 (m)

When outside agencies investigate sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

Central Office Staff: The investigation manager responded to, when an outside agency investigates and incident of sexual abuse in this facility, what role do you play. The PS&C unit would facilitate the needs of the outside agency as permitted by law.

Central Office Staff: The agency PREA coordinator indicated according to the MOU with the Sheriff's Office, they are required to inform the Professional Standards and Conduct (PS&C) Unit of the investigation. The PS&C Unit informs selected decision makers with the progress of the sexual abuse investigations.

Facility Staff: The facility PREA compliance manager responded to, if an outside agency investigates of sexual abuse, how does the facility remain informed of the progress of a sexual abuse investigation? They are required to inform OAS (Office of

Administrative Services) of their investigation and they keep the facility and agency informed.

115.72	Evidentiary standard for administrative investigations
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Supporting Information:</p> <ul data-bbox="242 329 1428 857" style="list-style-type: none"> • Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020 • Hennepin County Sheriff's Office PREA Policy 904 • DOCCR Administration Policy: Professional Standards and Conduct Investigations • DOCCR Administrative Policy: Professional Standards and Conduct Investigations • DOCCR Adult Corrections Facility Procedures: Resident Grievance and Complaint • DOCCR Adult Corrections Facility Policy: Resident Grievance and Compliant • Hennepin County Duty Supervisor-Sexual Abuse Response Checklist (#All) • Mental Health Referral Forms Booking (# All) Past 12 Months – PREA Related • Mental Health Referral Forms In-House (# All) Past 12 Months – PREA Related • Investigations (#All) Past 12 Months • Incident Reports (#All) Past 12 Months • Investigation Referral: Performance Assessment (#All) • DOCCR Website Instructions for Reporting Incidents of Sexual Abuse, Sexual Misconduct of Sexual Harassment and Investigation • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 889 347 918">115.72 (a)</p> <p data-bbox="242 947 1449 1008">The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p data-bbox="242 1037 1492 1198">The preponderance of the evidence is the standard used by the Hennepin County Sheriff's Office and the Professional Standards and Conduct (PS&C) Investigators. This is documented in Hennepin County Sheriff's Office Policy 904. DOOCR Policy, Professional Standards and Conduct: Investigations, in Paragraph 9., requires that all investigative standards set forth in the Prison Rape Elimination Act will be adhered to, including substantiating an allegation of sexual abuse, misconduct or harassment will be established by proof at a preponderance of the evidence.</p> <p data-bbox="242 1227 853 1256">The PREA investigation summaries include but not limited to:</p> <ul data-bbox="242 1285 608 1680" style="list-style-type: none"> • Complainant or Incident initiated • Type of Incident • PREA Standard • Immediate Response • Reports/Statements • Interviews • Video Review • Documents Reviewed • PREA Review Findings • Mental Health Assistance Provided • Complainant Notified • PREA Incident Review Required <p data-bbox="242 1709 1445 1769">Central Office Staff: The investigation manager responded to; what standard of evidence do you require to substantiate allegations of sexual abuse or sexual harassment. Preponderance of Evidence.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 858 456" style="list-style-type: none"> • DOCCR Professional Standards and Conduct Investigations • Completed Notifications Made to Residents (#All) • PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 490 349 517">115.73 (a)</p> <p data-bbox="240 551 1469 607">Following an investigation into a resident's allegation of sexual abuse suffered in an agency facility, the agency shall inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.</p> <p data-bbox="240 640 1485 999">DOCCR Professional Standards and Conduct Investigations, Policy, paragraph 9., requires that a resident who makes an allegation of sexual abuse is to be informed, either verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded following an investigation by external law enforcement sources. It also requires that following a resident's allegation that a staff person committed sexual abuse against the resident, the resident will be informed (unless the allegation has been determined to be unfounded through investigation) and the PS&C will relay the information to the facility Superintendent who's responsibility is to notify the resident that either the staff is no longer employed at the facility; (if known) that the staff has been indicted or charged at the facility; and (if known) that the staff has been convicted on a charge related to sexual abuse within the facility. Following a resident's allegation that he/she has been sexual abused by another resident in the facility, the contact's name and phone of the issuing County Attorney, will be provided to the resident so information related to charges and conviction of the sexual abuse will be conveyed under the relevant Data Privacy policy.</p> <p data-bbox="240 1032 1445 1088">All notifications are required to be documented. The notifications were made by the Professional Standards and Conduct Unit, via the Agency's Notification of Investigation Findings.</p> <p data-bbox="240 1122 1493 1211">Central Office Staff: The investigation manager responded to; do your agency procedures require that a resident who makes an allegation of sexual abuse must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Yes.</p> <p data-bbox="240 1245 1485 1335">Facility Staff: The superintendent responded to; does the facility notify a resident who makes an allegation of sexual abuse when the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. Yes. The inmate is provided with a written notification of the findings.</p> <p data-bbox="240 1368 349 1395">115.73 (b)</p> <p data-bbox="240 1429 1485 1485">If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the resident.</p> <p data-bbox="240 1518 1485 1675">The outside entity responsible for conducting sexual abuse investigations is the Hennepin County Sheriff's Office. This is established in the Memorandum of Understanding between the Hennepin County Sheriff's Office and the Hennepin County Department of Community Correction and Rehabilitation. Although there have not been any criminal allegations made during the past 12 months the Professional Standards and Conduct Unit maintains relationships with the HCSO and would serve as the liaison between the Juvenile Detention Center and the Hennepin County Sheriff's Office.</p> <p data-bbox="240 1709 349 1736">115.73 (c)</p> <p data-bbox="240 1769 1437 1825">Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency shall subsequently inform the resident (unless the agency has determined that the allegation is unfounded) whenever:</p> <ul data-bbox="240 1859 1430 1984" style="list-style-type: none"> • The staff member is no longer posted within the resident's unit; • The staff member is no longer employed at the facility; • The agency learns that the staff member has been indicated on a charge related to sexual abuse within the facility; or • The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. <p data-bbox="240 2018 882 2045">The agency notifies residents of the PREA investigations status.</p> <p data-bbox="240 2078 349 2105">115.73 (d)</p> <p data-bbox="240 2139 1485 2157">Following a resident's allegation that he or she has been sexually abused by another resident, the agency shall subsequently</p>

inform the alleged victim whenever:

- The agency learns that the alleged abuser has been indicated on a charge related to sexual abuse within the facility; or
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

See section (d) response.

115.73 (e)

All such notifications or attempted notifications shall be documented.

DOCCR Professional Standards and Conduct Investigations, Policy, paragraph 9., requires all notifications are required to be documented. The notifications were made by the Professional Standards and Conduct Unit, via the Agency's Notification of Investigation Findings. The Professional Standards and Conduct conducts administrative/non-criminal investigations and the Hennepin County Sheriff's Office conducts allegations that appear criminal. The PS&C, is responsible for informing the YRTC when the investigation has been concluded, provides a letter of notification of the results of the investigation to be given to the resident, and maintains contact with the Hennepin County Sheriff's Office to ensure if the alleged incident is criminal that the YRTC is informed of the results of the investigation.

Interviewed Target Residents: Four (4) target residents were interviewed. Two (2) were residents who reported sexual abuse. The residents were asked, do you know if the agency/facility is required to notify you when your sexual abuse allegation has been substantiated, unsubstantiated, or unfounded? Both residents indicated that they were notified of the investigation status and both were unfounded.

115.73 (f)

An agency's obligation to report under this standard shall terminate if the resident is released from the agency's custody.

Central Office Staff: The investigation manager indicated that the agency obligation to report under this standard will terminate if the resident is released from the agency's custody.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 502 297">Supporting Information:</p> <ul data-bbox="240 331 1209 555" style="list-style-type: none"> • DOCCR Human Resources Policy: Section Violations and Penalties • DOCCR Human Resources Policy: Section Rules and General Rules of Conduct • DOCCR Adult Corrections Facility Policy; Staff Code of Ethics and Standards of Conduct Policy • DOCCR Administration Policy: PREA, Staffing Patterns and Resident Supervision • Minnesota Government Data PRACTICES Act 13.01 • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 589 347 616">115.76 (a)</p> <p data-bbox="240 645 1449 703">Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="240 734 1493 862">DOCCR Prison Rape Elimination Act Policy, requires that staff must never tolerate any level of incidents of sexual abuse, sexual harassment, and sexual misconduct directed toward residents by staff, volunteers, interns, and/or contractors and that staff failure to address these behaviors, as mandated by PREA and DOCCR policy, will result in disciplinary action up to and including dismissal.</p> <p data-bbox="240 893 1465 1256">Policy requires the facility to report all terminations for violations of DOCCR sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation to law enforcement agencies and any relevant licensing bodies. DOCCR HR Rules govern employee discipline, Section 16 and 17 address expectations and disciplinary actions for violations. Paragraph 16.1, Compliance with the Act and the Rules of Conduct requires officers and employees of the County to conform to and aid in all proper ways in carrying into effect the provisions of the Act and the Rule. The rules of conduct are deemed conditions of employment in the County service. 16.2, Violations and Penalties, follows and requires that any County employee or applicant for a county position who refuses or neglects to comply with or conform to the provisions of the Act or these Rules or violates any of these provisions are subject to disciplinary action or disqualification unless the employee or applicant can prove to the appropriate authority the existence of significant or mitigating circumstances sufficient to modify or eliminate the disciplinary action. 16.3 provides the general rule of conduct and 17 addresses removal of an employee from the site and dismissal or involuntary demotion of employees. 17.3.</p> <p data-bbox="240 1288 347 1314">115.76 (b)</p> <p data-bbox="240 1344 1203 1370">Termination shall be the presumptive disciplinary sanction for ho have engaged in sexual abuse.</p> <p data-bbox="240 1402 1481 1662">Administrative staff indicated the presumptive action that would be taken if an investigation determined a staff violated an agency sexual abuse, sexual misconduct or sexual harassment policy would be termination and the Hennepin County Sheriff's Office may refer the case for prosecution. Policy also requires the Labor Relations Manager to administer discipline per agreed upon sanctions and to ensure that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. It also requires that staff will be subject to disciplinary sanctions up to and including termination for violation of sexual abuse or sexual harassment policies.</p> <p data-bbox="240 1693 347 1720">115.76 (c)</p> <p data-bbox="240 1749 1445 1843">Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="240 1874 1485 2067">The DOCCR PREA Policy 1., Administer Discipline Per Agreed Sanctions, Paragraph a., requires that the facility ensure that disciplinary sanctions for violations of agency policies relating to sexual abuse and sexual harassment (other than engaging in sexual abuse) is required to be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. It also requires that staff are subject to disciplinary sanctions up to and including termination for violation of sexual abuse or sexual harassment policies. Terminations for violations of DOCCR sexual abuse or sexual harassment policies.</p> <p data-bbox="240 2098 347 2125">115.76 (d)</p>

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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Terminations for violations of DOCCR sexual abuse or sexual harassment policies or resignations by staff that would have been terminated if not for their resignation to law enforcement agencies and any relevant licensing bodies.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Volunteer, Intern and CRP Rights and Responsibilities • SOP 05-10 Onboarding Volunteers, Interns & Community Resource Providers (CRP) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.77 (a)</p> <p>Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.</p> <p>DOCCR Professional Standards and Conduct Policy defines Employee Misconduct as Behaviors including, but not limited to the following:</p> <ul style="list-style-type: none"> • All complaints of sexual harassment, including staff/inmate/resident/client • Any level of complaint against contract Staff/vendors, volunteers/interns' Volunteers/interns. • Any complaint of Staff conducts, which, if proven, would result in significant discipline up to and including termination. • Any complaint that, when investigated, will require any type of forensic assistance. • Any complaint that a DOCCR Division Manager determines to be appropriate for referral to PS&C. <p>DOCCR Professional Standards and Conduct Policy, #3 requires that all allegations of sexual abuse and sexual harassment will be referred to PS&C for investigation and/or when required, to law enforcement pursuant to the memo of understanding with the Hennepin County Sheriff's Office. Hennepin County Sheriff's Office Memo of Understanding. DOCCR Policy, Prison Rape Elimination Act (PREA) 8., Administer discipline per agreed sanctions, Paragraph C. requires that all terminations for violations of DOCCR sexual abuse or sexual harassment policies or resignations by staff that would be terminated if not for their resignation to law enforcement agencies and any relevant licensing bodies. If the allegations appear criminal in nature the Hennepin County Sheriff's Office will be notified and conduct an investigation. If the allegation is substantiated the individual will be referred for prosecution and appropriate licensing bodies will be notified.</p> <p>115.77 (b)</p> <p>The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.</p> <p>DOCCR PREA Policy requires that staff, volunteers, interns, and contractors alleged to have perpetrated sexual abuse, harassment, and misconduct will be prohibited from contact with the victim and/or reporter pending an investigation.</p> <p>Facility Staff: The superintendent responded to; in the case of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, what remedial measures does your facility take? Does the facility always prohibit further contact with inmates? Yes. Notification would be sent to contractor's employment of no admittance. Gate officers would be notified of individual's lockout status. All documentation would be referred to the PS&C Unit for investigation.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Supporting Information:</p> <ul data-bbox="240 331 1043 757" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Rules & Discipline • DOCCR Adult Corrections Facility Procedures: Resident Rules & Discipline • DOCCR Adult Corrections Facility Policy: Special Management Unit – MS • DOCCR Adult Corrections Facility Procedures: Special Management Unit -MS • DOCCR Adult Corrections Facility Policy: Special Management Unit – WS • DOCCR Adult Corrections Facility Procedures: Special Management Unit - WS • DOCCR SOP 04-11M – Special Management Unit – Men’s Section • DOCCR SOP04-11W – Special Management Unit – Women’s Section • SOP 04-10 Administrative Separation • Incident reports (#All) • Investigation packages (#All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 790 347 817">115.78 (a)</p> <p data-bbox="240 846 1485 936">Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.</p> <p data-bbox="240 969 1485 1099">DOCCR Policy, PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse paragraph 5 requires that residents will be subject to disciplinary sanctions following an administrative or criminal finding that the resident engaged in resident-on-resident sexual abuse. Too, it requires that residents making false allegations will be held strictly accountable through all means available to the DOCCR.</p> <p data-bbox="240 1133 1485 1357">DOCCR Policy, Facility Rules and Due Process provides sanctions for minor and major rule violation. Major rule violations may result in any of the following: verbal discussion, Disciplinary Room Time beyond one hour; case plans; and one- hour reviews to be completed by a Corrections supervisor. This policy also requires that YRTC will discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Lastly policy requires that for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p data-bbox="240 1391 347 1417">115.78 (b)</p> <p data-bbox="240 1447 1422 1507">Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses y other inmates with similar histories.</p> <p data-bbox="240 1541 1477 1630">The Policy, Facility Rules and Due Process, Resident Rights, Paragraph 7., states that in the event a disciplinary sanction results in the isolation of a resident, the facility will not deny the resident daily large-muscle exercise or access to any legally required educational programming or special education services.</p> <p data-bbox="240 1664 1477 1753">Facility Staff: The superintendent responded to; are the sanctions are inmates subject to following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse? Per resident discipline SOP Rule #26, Sanction for Behavior Specified covers this process.</p> <p data-bbox="240 1787 347 1814">115.78 (c)</p> <p data-bbox="240 1843 1433 1904">The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, in any, should be imposed.</p> <p data-bbox="240 1937 1390 1998">Facility Staff: The superintendent responded to; is mental disability or mental illness considered when determining sanctions? Yes. SOP Resident Rules and Discipline covers this process.</p> <p data-bbox="240 2031 347 2058">115.78 (d)</p> <p data-bbox="240 2087 1493 2148">If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions</p>

as a condition of access to programming or other benefits.

115.78 (e)

The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

115.78 (f)

For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

A inmate report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred do not constitute falsely reporting an incident or lie.

115.78 (g)

An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.

The agency prohibits all forms of sexual activities between residents and staff.

115.81	Medical and mental health screenings; history of sexual abuse
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 496 300">Supporting Documents</p> <ul data-bbox="242 329 1005 555" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Objective Classification • DOCCR Adult Corrections Facility Procedures: Objective Classification • Documentation Medical Screenings (#All) Past 12 Months – PREA Related • Mental Health Screenings (#All) Past 12 Months – PREA Related • Case History Notes to Confirm Mental Health Follow-ups (#All) • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 586 349 616">115.81 (a)</p> <p data-bbox="242 645 1437 739">If the screening pursuant to standard 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p data-bbox="242 768 1485 1064">DOCCR Policy, PREA: Resident Receiving, Assessment, Classification and Orientation governs the screening processes. Staff complete the victimization screening and if the screening indicates that a resident has previously sexually abused, staff will document in MAIN (database) and pass this information on to the Centurion medical staff by completing the Medical Referral Form. Intake Staff complete the victimization assessment and ask if a resident has been previously sexually abused and if so, the intake staff documents it on the referral form. Policy also requires Centurion Medical Staff to complete an initial health screening within 23 hours to include completion of the sexual violence prevention screening questions and if a resident discloses prior sexual victimization or abusiveness determine whether it occurred in an institutional setting or the community and ensure that the resident is offered a follow-up with medical or mental health practitioners within 14 days of the initial health screening.</p> <p data-bbox="242 1093 349 1122">115.81 (b)</p> <p data-bbox="242 1151 1490 1245">If the screening pursuant to standard 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening.</p> <p data-bbox="242 1274 384 1303">Facility Staff:</p> <p data-bbox="242 1332 349 1361">115.81 (c)</p> <p data-bbox="242 1391 1490 1485">If the screening pursuant to standard 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner with 14 days of the intake screening.</p> <p data-bbox="242 1514 400 1543">See section (a).</p> <p data-bbox="242 1572 349 1601">115.81 (d)</p> <p data-bbox="242 1630 1469 1756">Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.</p> <p data-bbox="242 1785 349 1814">115.81 (e)</p> <p data-bbox="242 1843 1469 1906">Medical and mental health practitioners shall 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.</p>

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Documents</p> <ul style="list-style-type: none"> • Hennepin County Sheriff's Office MOU between the Hennepin County Sheriff's Office and the DOCCR 2020 • Hennepin County Sheriff's Office PREA Policy 904 • DOCCR Administration Policy: PREA, Institutional Reporting and Responding to Maltreatment and Sexual Abuse • DOCCR Administrative Policy: Office of Administrative Services, Incident Referrals • DOCCR Administrative Policy: Professional Standards and Conduct, Incident Intake and Triage • MOU Sexual Violence Center, and Centurion, Inc. • Sexual Violence Center Executive Director Comments • The Sexual Assault Resource Services, Sexual Nurse Examiner Program, Hennepin County Medical Center • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.82 (a)</p> <p>Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.</p> <p>PREA Policy, PREA Reporting and Responding Process describes medical services' responsibilities in the event a resident alleges sexual abuse. These services include mental health as well. Mental health is required to respond to notifications of sexual abuse and determine the need for providing crisis counseling during or after business hours. During nonbusiness hours, the on-call mental health services is to be notified. The purpose of mental health's response is to provide victims of sexual abuse with internal mental health services as well as opportunities for reasonable communication with external services such as victim advocacy groups or centers. Policy describes medical services' responsibilities. These include explaining to the victim the necessity of a physical exam to assess medical needs, provide any necessary treatments, and to ensure preservation of evidence. It also affirms that the facility will offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lock-up or juvenile facility.</p> <p>These services are timely, unimpeded access to emergency medical treatment and crisis intervention services.</p> <p>Interviewed Target Residents: Four (4) target residents were interviewed. Two (2) were residents who reported sexual abuse. The residents were asked, did you have the chance to see a medical or mental health staff in a timely fashion after you reported? Both residents indicated yes, within two days.</p> <p>115.82 (b)</p> <p>If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to standard 115.62 and shall immediately notify the appropriate medical and mental health practitioners.</p> <p>The Sexual Assault Resource Service, Sexual Assault Nurse Examiner Program, Hennepin County Medical Center brochure, provided to all residents, discusses the services that a victim will be offered. These include being cared for by a skilled and highly trained Sexual Assault Nurse Examiner who will explain to the resident what will happen while the resident is in the Emergency Department. The exam is explained to the resident. The resident is also informed the county in which the resident was assaulted is required by law to pay for the forensic exam. Phone numbers to emergency departments are provided as well as contact information for other resources, including the Sexual Violence Center Crisis Line and the Aurora Center Crisis Line (U of M). The resident would be stabilized and transferred to the hospital for a forensic examination. That exam would be conducted by a Sexual Assault Nurse Examiner, located at the Hennepin County Hospital.</p> <p>115.82 (C)</p> <p>Inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.</p> <p>The hospital would offer and provide the victim with STI prophylaxis and tests for the risk of pregnancy and options available to the victim related to pregnancy. The Centurion Medical Staff will provide any follow-up based on discharge instructions from the hospital. The Sexual Assault Resource Service Brochure explains that they SANE will evaluate the resident's risk</p>

for pregnancy and discuss safe prevention options; evaluate the resident's risk for contracting a sexually transmitted infection and offering medication to reduce that risk.

115.82 (d)

Treatment services shall be 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.

The reviewed Hennepin County Sheriff's Office Policy 904 affirms those forensic examinations, where medically appropriate, are provided at no cost to the victim. The Sexual Assault Resource Service, Sexual Assault Nurse Examiner Program brochure, contains a section entitled, "How will this exam be paid for?" According to the resource service, the county in which the victim was assaulted is required by law to pay for the forensic exam. It also states that if the victim has injuries that require medical care, the victim's insurance billed if possible while any charges beyond this will be covered by the hospital where the victim is seen. The victim is advised to call the Sexual Assault Resource Service if they receive any bills for the exam. The reviewed policies and procedures comply with the PREA Standards.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 496 297">Supporting Documents</p> <ul data-bbox="240 329 1007 521" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Objective Classification • Documentation Medical Screenings (#All) Past 12 Months – PREA Related • Mental Health Screenings (#All) Past 12 Months – PREA Related • DOCCR Adult Corrections Facility Procedures: Objective Classification • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 553 347 580">115.83 (a)</p> <p data-bbox="240 611 1442 672">The facility shall 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.</p> <p data-bbox="240 703 1485 862">Policy, PREA Reporting and Responding Process, Medical Services, I. asserts that the facility will offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. If screening indicates that the resident has experienced prior sexual victimization, medical staff will ensure the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p data-bbox="240 893 347 920">115.83 (b)</p> <p data-bbox="240 952 1453 1043">The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or replacement in, other facilities, or their release from custody.</p> <p data-bbox="240 1075 1481 1200">Medical staff related they would provide ongoing care as ordered in the discharge orders from the hospital. The Sexual Assault Resource Service brochure informs victims that their risk of pregnancy will be evaluated and safe prevention options discussed. The Sexual Assault Resource Service brochure informs victims the exam would also include evaluating risk for sexually transmitted infection and offering medication to reduce that risk.</p> <p data-bbox="240 1232 1474 1357">Policy, PREA, Reporting and Responding Process, M., affirms the facility will attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of the abuse history and other treatment when deemed appropriate by the medical and/or mental health practitioners. That same policy asserts that facility medical staff will provide ongoing services and care as outlined in their (CENTURION) policies.</p> <p data-bbox="240 1388 347 1415">115.83 (c)</p> <p data-bbox="240 1447 1458 1473">The facility shall provide such victims with medical and mental health services consistent with the community level of care.</p> <p data-bbox="240 1505 1437 1565">Facility Staff: The medical MD indicated that medical and mental health services offered are consistent with community level of care.</p> <p data-bbox="240 1597 347 1624">115.83 (d)</p> <p data-bbox="240 1655 1299 1682">Inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests.</p> <p data-bbox="240 1713 1433 1740">Facility Staff: The medical MD indicated that pregnancy test is offered to victims of sexual abusive vaginal penetration.</p> <p data-bbox="240 1771 347 1798">115.83 (e)</p> <p data-bbox="240 1830 1406 1890">If pregnancy results from the conduct described in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p data-bbox="240 1921 1453 1982">Facility Staff: Medical staff indicated that if pregnancy results from rape, the victim will receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.</p> <p data-bbox="240 2013 347 2040">115.83 (f)</p> <p data-bbox="240 2072 1433 2132">Inmate victims of sexual abuse whole incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.</p>

Facility Staff: The medical MD indicated that if pregnancy results from sexual abuse while incarcerated victims are given timely information and access to all lawful pregnancy – related services. This information is given during ER evaluation.

115.83 (g)

Treatment services shall be 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.

The reviewed Hennepin County Sheriff's Office Policy 904 affirms those forensic examinations, where medically appropriate, are provided at no cost to the victim. The Sexual Assault Resource Service, Sexual Assault Nurse Examiner Program brochure, contains a section entitled, "How will this exam be paid for?" According to the resource service, the county in which the victim was assaulted is required by law to pay for the forensic exam. It also states that if the victim has injuries that require medical care, the victim's insurance billed if possible while any charges beyond this will be covered by the hospital where the victim is seen. The victim is advised to call the Sexual Assault Resource Service if they receive any bills for the exam. The reviewed policies and procedures comply with the PREA Standards.

115.83 (h)

All prisons shall 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.

Facility Staff: The medical MD indicated that mental health is consulted to provide evaluation which occurs within 7 days.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information:</p> <ul style="list-style-type: none"> • DOCCR Administration Policy: PREA, Sexual Abuse Data Collection and Review • DOCCR Administration Procedures: PREA, Sexual Abuse Data Collection and Review • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • Documentation of Sexual Abuse Incident Reviews (30 Days) – (#All) • DOCCR Prison Rape Elimination Act Incident Review Team Process • Investigation Packages (#All) • 2019 Annual PREA Report • 2019 SSV Report • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p>115.86 (a)</p> <p>The facility shall 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.</p> <p>DOCCR Policy, PREA, Sexual Abuse Data Collection and Review, 5., requires that incidents are reviewed within 30 days of the conclusion of the investigation, using the DOCCR Prison Rape Elimination Act (PREA), Incident Review Team Process and DOCCR Sexual Abuse Incident Review Form. The procedures for implementation of that same policy, in paragraph 6, require the PREA Coordinator to review all incidents within 30 days following completion of the investigation and bring concerns and further recommendations to the Area Director responsible for the facility.</p> <p>Facility Staff: The superintendent responded to; does your facility have a sexual abuse incident review team? Yes.</p> <p>115.86 (b)</p> <p>Such review shall ordinarily occur within 30 days of the conclusion of the investigation.</p> <p>See section (a) response.</p> <p>115.86 (c)</p> <p>The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>The agency provided the auditor with the document entitled: "DOCCR Prison Rape Elimination Act (PREA); Incident Review Team Process." This document states that the DOCCR Executive Team has decided to review substantiated and unsubstantiated sexual misconduct incidents. The document then goes on to document the items the team will consider in their review. The team consists of the Area Director, Division Manager, PREA Coordinator, Professional Standards and Conduct Unit Investigator with input from Line Supervisors and the Contract Medical Provider. The team, according to the process, requires that all findings and recommendations are reported to the DOCCR Executive Team. Principles governing the team review process include: 1) Information discussed during the Sexual Abuse Incident Review will remain confidential with the exception of reporting findings and recommendations to the DOCCR Executive Team and membership on the team is restricted to those individuals that are required for the incident review.</p> <p>Facility Staff: The superintendent responded to; does the team include upper-level management officials and allow for input from line supervisors, investigators, and medical or mental health practitioners? Yes. Area Director, Superintendent, Investigators, Medical Providers, Facility PREA Compliance Manager, and Agency PREA Coordinator.</p> <p>115.86 (d)</p> <p>The review team shall:</p> <ul style="list-style-type: none"> • Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; • Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian; gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise cause by other group dynamics at the facility;

- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Assess the adequacy of staffing levels in that area during different shifts;
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d))1) – (d) (5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

Policy, PREA Reporting and Responding, in Paragraph 4. requires that after the investigation is completed, each incident will be reviewed by the PREA Compliance Manager and upper-level Management, with input from Supervisors, Investigators, and medical or mental health practitioners. It requires that incidents will be reviewed within 30 days of the conclusion of the investigation by using the DOCCR Prison Rape Elimination Act (PREA) Incident Review Team Process and DOCCR Sexual Abuse Incident Review Form. The reviewed DOCCR Sexual Abuse Incident Review documents all the items required by the PREA Standards.

Facility Staff: The superintendent responded to; how does the team use the information from the sexual abuse incident review? Review recommendations shared with the Management Team, PREA Team, adjust policies and procedures, training as needed to correct issues. Communicate changes.

115.86 (e)

The facility shall implement the recommendations for improvement, or shall document its reasons for not doing so.

The agency implement recommendation for improvement and document if the agency do not implement.

115.87	Data collection
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 496 300">Supporting Documents</p> <ul data-bbox="242 329 842 521" style="list-style-type: none"> • DOCCR Policy, Sexual Abuse Data Collection and Review • DOCCR Data Collection Instrument • Survey of Sexual Victimization, 2019 Report • 2020 PREA Annual Report • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 555 349 584">115.87 (a)</p> <p data-bbox="242 611 1477 672">The agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.</p> <p data-bbox="242 701 1493 896">DOCCR Policy, PREA, Sexual Abuse Data Collection and Review, affirms that DOCCR Divisions and contactors will collect data concerning every allegation of sexual abuse, sexual misconduct and sexual harassment at facilities and confinement settings. The agency uses and has published the standard set of definitions established by the PREA Standards. The agency has a 36- page data collection instrument. Too, weekly, the Professional Standards and Conduct Unit submits a report of all allegations that were received for investigation, including the status of the investigation. The data collected exceeds that required for the SSV.</p> <p data-bbox="242 927 349 956">115.87 (b)</p> <p data-bbox="242 983 1075 1012">The agency shall aggregate the incident-based sexual abuse data at least annually.</p> <p data-bbox="242 1041 1489 1435">The reviewed 2019 Annual Report affirmed the DOCCR collects data from the referrals for investigation of sexual abuse, sexual misconduct, and sexual harassment; both offender-on-offender and staff-on-offender. The report contains the aggregated data for the year and a comparison of the number of incidents reported between calendar year 2013 and calendar year 2019. All allegations are entered and tracked through a secure electronic database by the DOCCR Professional Standards and Conduct (Investigations) Unit DOCCR Policy, PREA, Sexual Abuse Data Collection and Review, procedures, A. Data Review, requires Division Managers or Designees, Contactors, Safety Manager/PREA Coordinator, Professional Standards and Conduct Unit to identify the problem areas using collected data, study the data to improve the safety of residents, assess effectiveness of DOCCR's sexual abuse prevention, detection and response policies, practices and training and identify responses to problems , to take corrective action as required and for the PREA Coordinator to prepare an annual report that addresses findings as well as corrective actions taken to address problem areas; a comparison of the current year's data with previous year's data and an assessment of the Department's progress addressing sexual abuse and sexual harassment and sexual misconduct.</p> <p data-bbox="242 1467 349 1496">115.87 (c)</p> <p data-bbox="242 1523 1445 1583">The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.</p> <p data-bbox="242 1615 501 1644">See section (a) response.</p> <p data-bbox="242 1675 349 1704">115.87 (d)</p> <p data-bbox="242 1731 1414 1792">The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="242 1821 1485 1915">The agency maintains, review and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. A review of the 2019 Agency Annual Report reflects that the agency is compliant with this process.</p> <p data-bbox="242 1946 349 1975">115.87 (e)</p> <p data-bbox="242 2002 1450 2063">The agency also shall obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents.</p> <p data-bbox="242 2094 1485 2154">The annual report is to address corrective actions, comparisons of previous year data, and an assessment of the Department's progress in addressing sexual abuse, sexual misconduct, and sexual harassment. The reviewed annual report</p>

discusses the aggregated data, analyzes the data, makes comparisons, and corrective action. Corrective actions, if applicable, were identified for each of the DOCCR Facilities. The Juvenile Detention Center had one corrective action and that was to reinforce a procedure for monitoring residents being transported on the elevator. It also documented that all three COCCR institutions are fully PREA compliant.

115.87 (f)

Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30.

The agency provides required data to DOJ thru completing the SSV reports.

115.88	Data review for corrective action
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 496 300">Supporting Documents</p> <ul data-bbox="240 331 1123 622" style="list-style-type: none"> • DOCCR Adult Corrections Facility Policy: Resident Grievance & Compliant Procedures • DOCCR Adult Corrections Facility Procedures: Resident Grievance & Compliant • DOCCR Policy, Sexual Abuse Data Collection and Review • DOCCR Data Collection Instrument • Survey of Sexual Victimization, 2019 Report • 2020 PREA Annual Report • DOCCR Website • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="240 658 347 685">115.88 (a)</p> <p data-bbox="240 712 1437 775">The agency shall review data collected and aggregated pursuant to standard 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by:</p> <ul data-bbox="240 801 1394 898" style="list-style-type: none"> • Identifying problem areas; • Taking corrective action on an ongoing basis; and • Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. <p data-bbox="240 925 1490 1223">DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, Policy, Paragraph 3., requires Divisions to create and publish annual reports which present the data and identify corrective actions taken to address the problems. The procedures for implementing the policy required Division Managers/Designees, Contractors, Safety Manager/PREA Coordinator, and Professional Standards and Conduct Unit (PS&C) to review the data to identify problem areas using the collected data and to assess the effectiveness of DOCCR's sexual abuse prevention, detection and response policies, practices and training and identify responses to problems and take corrective action as required. The annual report is to address corrective actions, comparisons of previous year data, and an assessment of the Department's progress in addressing sexual abuse, sexual misconduct, and sexual harassment. The reviewed annual report discusses the aggregated data, analyzes the data, comparisons, and corrective action. Corrective actions, if applicable, were identified for each of the DOCCR Facilities.</p> <p data-bbox="240 1249 1490 1413">Central Office Staff: The agency head indicated that the agency uses incident-based sexual abuse data to assess and improve sexual prevention, detection, and response policies, practices, and training. Data is reviewed for patterns in location, staff compliment, resident activity. Any patterns identified are addressed through reviews of procedures, policies, training, staffing, or any other items that are identified based on the data review. Changes are implemented when warranted after those reviews.</p> <p data-bbox="240 1417 898 1444">The agency head also stated that she approval all annual reports.</p> <p data-bbox="240 1471 1461 1637">Central Office Staff: The agency PREA coordinator indicated that the agency review data collected and aggregated pursuant to 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training. The PREA coordinator also meets with the divisions to document findings on the PREA Incident Review form. This information is securely kept in the division manager's file. Professional Standards and Conduct Unit has a secured database and keeps paper files in a lock room.</p> <p data-bbox="240 1664 347 1691">115.88 (b)</p> <p data-bbox="240 1718 1485 1780">Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse.</p> <p data-bbox="240 1807 501 1834">See section (a) response.</p> <p data-bbox="240 1861 347 1888">115.88 (c)</p> <p data-bbox="240 1915 1490 1977">The agency's report shall be approved by the agency heard and made readily available to the public through its website or, if it does not have one, through other means.</p> <p data-bbox="240 2004 1474 2114">The annual report is readily available to any viewer on the DOCCR website, http://www.hennepin.us/residents/public-safety/prea. The agency makes the report available on the agency's website. The Director of the Department of Community Corrections and Rehabilitation approved the annual reports.</p>

115.88 (d)

The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted.

DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, B. Data Management, 2.a and b, requires the agency to remove all personal identifiers before making sexual abuse data publicly available and requires managers to redact information from the reports when publicizing it if it would present a clear and present threat to the safety and security of a facility. When that occurs, the agency is required to indicate the nature of the information that has been redacted.

Central Office Staff: The agency PREA coordinator indicated that DOCCR does indicate the nature of the material redacted. These requirements are outlined in the PREA Sexual Abuse Data Collection and Review Policy.

115.89	Data storage, publication, and destruction
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 496 300">Supporting Documents</p> <ul data-bbox="242 329 842 488" style="list-style-type: none"> • DOCCR Policy, Sexual Abuse Data Collection and Review • DOCCCR Resident Records, Data Management • 2020 Annual Report • Online PREA Audit: Pre-Audit Questionnaire • Interviews <p data-bbox="242 519 349 548">115.89 (a)</p> <p data-bbox="242 577 1201 607">The agency shall ensure that data collected pursuant to standard 115.387 are securely retained.</p> <p data-bbox="242 636 1489 862">DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, B., Data Management, Paragraph 1., requires that Division Managers/Designees, Contractors, and Department Director ensure that data collected is stored in a central controlled location with oversight by designated staff. Incident based data and aggregate data are securely retained. DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, Paragraph 4, requires date collection, storage, retention, access, publication and destruction of reports and data must be implemented according to statute, rules and policies. Exceptions would occur when the release of information would present a clear and present threat to the safety and security of a facility or confinement setting.</p> <p data-bbox="242 893 349 922">115.89 (b)</p> <p data-bbox="242 952 1489 1043">The agency shall 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.</p> <p data-bbox="242 1075 1489 1234">DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, B. Data Management, 2, requires Division Managers/Designees, Contractor and Department Director to post all sexual abuse data from private facilities the institution contracts with and make it readily available to the public at least annually through its website. DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, B. Data Management, 2.a, requires that all personal identifiers are removed before making sexual abuse data publicly available.</p> <p data-bbox="242 1265 349 1294">115.89 (c)</p> <p data-bbox="242 1323 1361 1352">Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.</p> <p data-bbox="242 1382 501 1411">See section (b) response.</p> <p data-bbox="242 1440 349 1469">115.89 (d)</p> <p data-bbox="242 1498 1461 1556">The agency shall maintain sexual abuse data collected pursuant to 115.387 for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p data-bbox="242 1585 1473 1680">DOCCR Policy, PREA: Sexual Abuse Data Collection and Review, Policy 5., States that data pertaining to sexual abuse, sexual misconduct, or sexual harassment must be retained a minimum of 10 years following the date of the initial collection. Exceptions would be directed by Federal, State, or local laws or rules and policies.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Supporting Information</p> <ul style="list-style-type: none"> • Agency Website • Past PREA Reports • Online PREA Audit: Pre-Audit Questionnaire Juvenile Facilities • Interviews <p>115.401 (a)</p> <p>During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or a private organization on behalf of the agency, is audited at least once.</p> <p>The agency began having their facilities audited in 2017. At this point, the agency complied with the auditing process. Compliant.</p> <p>115.401 (b)</p> <p>During each one-year period starting on August 20, 2013, the agency shall ensure that at least one third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited.</p> <p>The agency began having their facilities audited in 2017. At this point, the agency complied with the auditing process. Compliant.</p> <p>115.401 (c)</p> <p>The Department of Justice may send a recommendation to an agency for an expedited audit if the Department has reason to believe that a particular facility may be experiencing problems relating to sexual abuse. The recommendation may also include referrals to resources that may assist the agency with PREA related issues.</p> <p>The agency has not received and recommendation from the Department of Justice, however, the agency is prepared to comply with any request receive by DOJ.</p> <p>Compliant.</p> <p>115.401 (d)</p> <p>The Department of Justice shall develop and issue an audit instrument that will provide guidance on the conduct of and contents of the audit.</p> <p>Compliant.</p> <p>115.401 (e)</p> <p>The agency shall bear the burden of demonstrating compliance with the standards.</p> <p>Compliant.</p> <p>115.401 (f)</p> <p>The auditor shall review all relevant agency-wide policies, procedures, reports, internal and external audits, and accreditation for each facility type.</p> <p>Compliant.</p> <p>115.401 (g)</p> <p>The audits shall review, at a minimum, a sampling of relevant documents and other records and information for the most recent one-year period.</p> <p>Compliant.</p> <p>115.401 (h)</p>

The auditor shall have access to, and shall observe, all areas of the audited facilities.

Compliant.

115.401 (i)

The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information).

Compliant.

115.401 (j)

The auditor shall retain and preserve all documentation relied upon in making audit determinations. Such documentation shall be provided to the Department of Justice upon request.

Compliant.

115.401 (k)

The auditor shall interview a representative sample of residents, residents, and detainees, and of staff, supervisors, and administrators.

Compliant.

115.401 (l)

The auditor shall be permitted to conduct private interviews with residents, residents, and detainees.

Compliant.

115.401 (m)

Residents, residents, and detainees shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

Compliant.

115.401 (n)

Auditors shall attempt to communicate with community-based or victim advocates who may have insight into relevant conditions in the facility.

Compliant.

115.403	Audit contents and findings
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 496 300">Supporting Information</p> <ul data-bbox="240 331 884 456" style="list-style-type: none"> • Agency Website • Past PREA Reports • Online PREA Audit: Pre-Audit Questionnaire Juvenile Facilities • Interviews <p data-bbox="240 488 360 515">115.403 (a)</p> <p data-bbox="240 546 1425 604">Each audit shall include a certification by the auditor that no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.</p> <p data-bbox="240 636 352 663">Compliant.</p> <p data-bbox="240 694 360 721">115.403 (b)</p> <p data-bbox="240 752 1331 779">Audit reports shall state whether agency-wide policies and procedures comply with relevant PREA standards.</p> <p data-bbox="240 810 352 837">Compliant.</p> <p data-bbox="240 869 360 896">115.403 (c)</p> <p data-bbox="240 927 1469 1016">For each PREA standard, the auditor shall determine whether the audited facility reaches one of the following findings: Exceeds Standards, Meets Standards; Or Does Not Meet Standard. The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.</p> <p data-bbox="240 1048 352 1075">Compliant.</p> <p data-bbox="240 1106 360 1133">115.403 (d)</p> <p data-bbox="240 1164 1442 1223">Audit reports shall describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility, and shall include recommendations for any required corrective action.</p> <p data-bbox="240 1254 352 1281">Compliant.</p> <p data-bbox="240 1312 360 1339">115.403 (e)</p> <p data-bbox="240 1370 1390 1429">Auditor shall redact any personally identifiable resident or staff information from their reports, but shall provide such information to the agency upon request, and may provide such information to the Department of Justice.</p> <p data-bbox="240 1460 352 1487">Compliant.</p> <p data-bbox="240 1518 360 1545">115.403 (f)</p> <p data-bbox="240 1576 1477 1635">The agency shall ensure that the auditor's final report is published on the agency's website if it has on, or is otherwise made readily available to the public.</p>

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

115.13 (a)	Supervision and monitoring	
	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?	na
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	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
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

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

115.15 (d)	Limits to cross-gender viewing and searches	
	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
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

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

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

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

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

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	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
115.33 (b)	Inmate education	
	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
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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

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

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	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
115.42 (a)	Use of screening information	
	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
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

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

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

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

115.53 (a)	Inmate access to outside confidential support services	
	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
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

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

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	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
115.67 (a)	Agency protection against retaliation	
	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
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	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
115.68 (a)	Post-allegation protective custody	
	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
115.71 (a)	Criminal and administrative agency investigations	
	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

115.71 (b)	Criminal and administrative agency investigations	
	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
115.71 (c)	Criminal and administrative agency investigations	
	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
115.71 (d)	Criminal and administrative agency investigations	
	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
115.71 (e)	Criminal and administrative agency investigations	
	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
115.71 (f)	Criminal and administrative agency investigations	
	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
115.71 (g)	Criminal and administrative agency investigations	
	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
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	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
115.71 (j)	Criminal and administrative agency investigations	
	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
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

115.76 (c)	Disciplinary sanctions for staff	
	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
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	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
115.78 (d)	Disciplinary sanctions for inmates	
	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
115.78 (e)	Disciplinary sanctions for inmates	
	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

115.78 (f)	Disciplinary sanctions for inmates	
	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
115.78 (g)	Disciplinary sanctions for inmates	
	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
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	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
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	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
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	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
115.86 (a)	Sexual abuse incident reviews	
	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

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	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
115.87 (d)	Data collection	
	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
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	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

115.88 (a)	Data review for corrective action	
	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
115.88 (b)	Data review for corrective action	
	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
115.88 (c)	Data review for corrective action	
	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
115.88 (d)	Data review for corrective action	
	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
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	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
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	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
115.401 (a)	Frequency and scope of audits	
	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

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	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
115.403 (f)	Audit contents and findings	
	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