# **PREA Facility Audit Report: Final**

Name of Facility: Raymond Laborde Correctional Center

Facility Type: Prison / Jail

**Date Interim Report Submitted:** 07/01/2021 **Date Final Report Submitted:** 09/07/2021

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		V
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		V
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.		<b>V</b>
Auditor Full Name as Signed: William Peck  Date of Signature: 09/07/2021		

AUDITOR INFORMATION	
Auditor name:	Peck, William
Email:	william199@comcast.net
Start Date of On-Site Audit:	05/12/2021
End Date of On-Site Audit:	05/14/2021

FACILITY INFORMATION	
Facility name:	Raymond Laborde Correctional Center
Facility physical address:	1630 Prison Road, Cottonport, Louisiana - 71327
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Jude Pitre
Email Address:	jude.pitre@la.gov
Telephone Number:	318 876 4239

Warden/Jail Administrator/Sheriff/Director		
Name:	Marcus Myers	
Email Address:	marcus.meyers@la.gov	
Telephone Number:	318-876-4225	

Facility PREA Compliance Manager		
Name:	Jude Pitre	
Email Address:	jude.pitre@la.gov	
Telephone Number:	O: (318) 876-4239	

Facility Health Service Administrator On-site		
Name: Dr. Spencer Launey (Healthcare Authority)		
Email Address:	spencer.launey@l.gov	
Telephone Number:	(318) 876-4421	

Facility Characteristics		
Designed facility capacity:	1808	
Current population of facility:	1487	
Average daily population for the past 12 months:	1702	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?	Males	
Age range of population:	19-83 years of age	
Facility security levels/inmate custody levels:	Min, Med, Max	
Does the facility hold youthful inmates?	No	
Number of staff currently employed at the facility who may have contact with inmates:	329	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	5	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	60	

AGENCY INFORMATION	
Name of agency:	Louisiana Department of Public Safety and Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	504 Mayflower Street, Baton Rouge, Louisiana - 70802
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:		
Name:	Chief Seth Smith	
Email Address:	504 Mayflower Baton Rouge	
Telephone Number:	2253421330	

Agency-Wide PREA Coordinator Information			
Name:	Michele Dauzat	Email Address:	michele.dauzat@la.gov

#### **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.

Before and during the site visit review, the auditor reviewed the various files and documents noted below, to evaluate compliance levels of the policies and procedures. Almost all documents were uploaded into the OAS (Online Assessment System) and reviewed before arriving on-site, but some specific files were not reviewed until after arrival at the facility (personnel files, investigation data, control center, and unit logs, etc.) The facility has zero notices of non-compliance with local, state, or federal laws or regulations. These file and document reviews were also integral to the triangulation of data following the on-site review.

In addition to a DOC and RLCC policy review, the following documents were part of the audit review: inmate Handbook; Investigator training certification; Receipt records of admission education by inmates; Volunteer and Contractor training guide; Staff training topics and annual training received; Medical and Mental health staff training certificates; Staffing Plan; Investigation folders; Personnel Folders including Volunteer and contractor folders; Personnel Background Investigations results; Offender online and paper confinement folders; Standards, and Policies; Coordinated Response Plan; Medical and Mental Health department files; Housing Unit logs. Files of the same 6 offenders were reviewed across all types of offender files and were then supplemented with a random selection of other offender files to review in each area. All staff files were randomly selected and included staff from both 12-hour shifts.

The initial site review included all areas of the prison and was followed by the initiation of files being reviewed, and then the conduct of interviews. The following departments were visited to review conditions and operations:

Administration; Investigations; Security; General Population and Restricted Housing; Recreation; Education/Vocational areas; Mental Health/Medical; Food Service; Chapel.

The auditor observed limited numbers of offenders performing work duties at and participating in recreational activities outside. Work and program opportunities have been severely limited this past year due to COVID impact and normal operations are just now being re-started. Group recreational activities have also been curtailed as the facility utilized the gymnasium space to enable COVID quarantine housing.

COVID Related Modifications beginning April 2020, now being restored to more normal functioning:

- In-Person Visitation Halted. Began Video Visitation (6-2020); Beginning of Return to In-Person, Non-Contact Visitation 4-2021.
- Volunteers Prevented from Grounds; Beginning of Return 4-2021
- Offender Organization Meeting and Activities Halted; Beginning of Return 4-2021
- Reduction in Offender Population Due to Decrease in Intake; Now Beginning to Increase
- Quarantining due to COVID
- Programming Halted; Education Halted, Beginning to return 4-2021
- Housing Transfers Minimized To Maintain Dorm Integrity from COVID spread

<u>Interviews</u>: During the audit, the auditor met with both staff and offenders to verify observations and/or perform required Standards' interviews concerning facility operations.

The major portion of the site audit consisted of conducting these structured interviews with specialized and randomly selected staff and also with random and targeted categories of offenders (Disabled, LGBTI, reported victims of abuse, etc.).

Interviews included a wide range of staff that included both executive and line staff for the facility. Specialized staff interviewed included Medical and Mental Health Supervisors, higher-level supervisors, as well as staff from Programs, Human Resources, Training, Classification, Intake Staff, and Contractors and Volunteers.

#### Offender Interviews

There were 53 offenders interviewed during the audit, 32 randomly selected, and 21 from target offender groups listed below. Offenders included in more than one category were interviewed for all targeted categories of which they were part and totaled 32 targeted categories. The offenders interviewed are aware of the PREA education and reporting programs. Offender interviews were conducted representing all housing areas as well as program, work, and medical areas.

- 5 Inmates who reported victimization during risk screening
- · 7 Offenders who identify as LGB
- 5 Transgender offenders
- 7 Reporting Abuse/Victimization
- 3 Physical Disability

- 1 Blind Offender
- · 2 Limited English Proficiency
- 2 Cognitive Disability
- 21 Random Offenders

#### Staff Interviews

The audit team interviewed 49 staff in the course of the audit: 8 DOC Headquarters and facility leadership staff; 19 randomly selected staff; 17 specialized staff; 1 volunteer; 2 Contractor personnel; and 2 representatives of community agencies that provide victim assistance and support. All senior and specialized staff, and the officers on the shifts, had been through PREA training and reported understanding of rules, processes, and PREA requirements.

Leadership Staff Interviewed:

- 1 Agency Head (On File)
- 1 Agency PREA Coordinator
- 1 Facility Contracting Officer
- 1 Warden
- 1 Assistant Warden/PREA Coordinator
- 1 PREA Compliance Manager
- 1 Human Resources Manager
- 1 Investigator

Specialized Staff Interviewed:

- 1 Incident Review Board Member
- 2 Facility Investigators
- 1 Retaliation Monitor
- 1 Volunteer who has contact with offenders
- 2 Contractors
- Includes Chaplain/Contractor
- 2 Medical Staff
- 3 Mental Health Staff
- 2 Intermediate or Higher-Level Supervisors Who Make Unannounced Rounds
- 2 Intake Supervisors
- 1 Staff Who Provides Risk Screening
- 1 Staff Who Supervises Segregated Housing
- 2 First Responders
- 1 Sexual Assault Nurse Examiner
- 1 Crisis Agency/Victim Support Provider

Randomly Selected Staff Interviewed: 19

All staff interviewed were responsive regarding their respective areas of responsibility regarding PREA and affirmed compliance with the applicable PREA standards. All uniformed staff are trained as first responders and are familiar with their duties. The staff was familiar with the procedures regarding reporting, responding, and evidence preservation.

All data from interviews, site visit review, and extensive review of policy and records were reviewed and assessed post-visit, the review included several telephone calls, emails, and questions with the PREA Compliance Manager and one with the Deputy Warden, Assistant Warden, and PREA Compliance Manager.

# **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 Raymond Laborde Correctional Center (RLCC) is an 1808 bed medium security facility located in the southwest region of Avoyelles Parish in Cottonport, Louisiana, and came online and started receiving offenders in 1989. It was formerly known as the Avoyelles Correctional Center until the Louisiana State Legislature changed the name to the Raymond Laborde Correctional Center on July 1, 2016. It normally operated in recent years with a population of about 1700 but that dropped below 1500 during the COVID pandemic.

The original design capacity was 610 beds and RLCC has had several major structural alterations to grow to its current capacity of 1,808 beds.

Staffing has 329 personnel who may come in contact with offenders and about 60 dependable volunteers, although a larger number come to the facility over the course of an entire year.

The facility currently consists of 48 buildings, including the Administration building. Inside the secured perimeter RLCC has 104 multiple occupancy cells and four dormitories. RLCC's four general population housing units (Cajun one, Cajun two, Cajun three, and the Hope Dorm) are divided into eight tiers and house minimum and medium custody offenders.

The "Crawdad Unit" is a maximum custody housing cellblock divided into eight tiers, each with thirteen two-man cells, and can house 208 offenders. These offenders are classified as maximum custody. Two tiers in the maximum custody housing are used for administrative segregation; and two tiers are designed as temporary holding area for offenders whose continued presence in the general population pose a threat to life, property, the orderly operation of the institution, or who are the subject of an investigation.

The remaining tier in Crawdad Unit is designated to house extended lockdown offenders. This type of segregation is used primarily after disciplinary hearings for offenders found guilty of violating one or more serious rules; offenders who are a danger to themselves or others; offenders who are serious escape risks; or offenders who pose a clear threat to the security of the facility. Each of these housing unit tiers opens to a central rotunda officer control room.

There are 58 exterior cameras and 70 cameras spread throughout areas where security violations are more likely to occur. The only housing area with cameras is the Crawdad Unit (Segregation and Special Housing Areas), with 6 analog cameras. The Main Control Room location provides the perimeter observation capabilities and the Command Post can view perimeter areas as well as some housing and program spaces. Access to the Main Control Room is highly restricted and individuals must log in and out. The only camera cells are 2 suicide cells, with no cross-gender viewing for those cells. There are privacy walls in the toilet areas and the number of offenders allowed in the toilet/shower area is restricted to no more than 5 at a time. RLCC has relatively few cameras in general areas but is nearing the completion of fiber cable installation that will allow a significant increase in camera support.

#### **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

Standards Not Met: 115.43; 115.53; 115.68

The Auditor is prepared to assist as desired in addressing Corrective Actions needed in these areas.

# **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

#### **Auditor Discussion**

The DPS&C Secretary has appointed a Department PREA Coordinator who has oversight of activities to develop, implement and oversee DPS&C's efforts to comply with the PREA Standards in all units. She reports that she has adequate time for this function, in addition to her Assistant Warden duties at her facility. For PREA matters, she reports to the Agency Chief of Operations. Her information provided indicates that the agency has a system of routine telephone conferences, site visits regularly, and that there are routine mock audits and video conferences of both State facilities and local level (Parish) facilities per their contracts.

"It is the policy of RLCC to provide a safe, humane and appropriately secure environment, free from threats of sexual abuse and sexual harassment for all staff, volunteers, contractors, and offenders by maintaining a program of prevention, detection, response, reporting, investigating and tracking of all alleged and substantiated incidents of sexual abuse. RLCC has zero-tolerance for incidents of sexual abuse and sexual harassment." RLCC's designated Asst. Warden for Administration serves as the PREA Compliance Manager to coordinate efforts to comply with the PREA standards. The PREA Compliance Manager (PCM) reported in the interview that he has sufficient time and authority to coordinate the facility's efforts to comply with PREA Standards.

The PREA Compliance Manager (PCM) serves as a liaison between RLCC and DPS&C's PREA Coordinator and other appropriate Headquarters staff and is responsible for monitoring PREA related activities, etc. The PREA Compliance Manager (PCM) ensures that each requirement of Department Regulation C-01-022, on Prison Rape Elimination Act (PREA, including verification that all training, screening, assessments, reporting, and monitoring is accomplished promptly."

The Department has a zero-tolerance policy toward victimization and sexual abuse within the facilities through the PREA Program. Full investigations, appropriate reporting, and compliance to the standards program will be treated as a top priority by administrators and investigators.

Staff who violate this regulation may receive disciplinary action, up to and including termination.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Agency does contract for confinement, not RLCC per se. RLCC does contract for services and some personnel, however, and the contracting agent interviewed indicated that part of her job is to ensure every contract is totally clear on PREA requirements, training etc. The Agency PREA Coordinator affirmed that they do contract out confinement and all PREA requirements are included in the contracts; further, she noted that all contractors are routinely audited by the State agency and the audit includes PREA requirement compliance.

# 115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Department Regulation No. A-02-018 (Institutional Staffing) requires each facility to develop and document a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect offenders against sexual abuse. When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden is tasked to consider how such expansions, modifications, or updates would enhance the unit's ability to protect offenders from sexual abuse.

The facility has added additional video cameras since the last monitoring to assist the effectiveness of the facility PREA program. Each year a review and evaluation are conducted to note any areas of need or best practice in the placement of cameras. Currently, all areas of offender housing and/or activity area are well supervised.

The Warden reported in his interview that it requires continuous attention to ensure that priority and critical billets are filled in each shift. When calculating adequate more long-term staffing levels and determining the need for video monitoring, each unit is required to take into consideration the items listed in §115.13(A).

Interviews with the Warden, PREA Compliance Manager, and senior staff also indicate that all incident data is considered in staffing reviews, but all interviews noted that there are few sexual assault incidents to actually review and the Sexual Assault Incident Reviews normally focus more on staffing, camera technology, blind spots and population characteristics. The PREA Coordinator, in her interview, indicated that she reviews every facility staffing plan annually.

In circumstances where the staffing plan is not complied with, the Warden or designee has to document and justify deviations from the plan. This document is forwarded to the Agency PREA Coordinator Compliance Manager for retention purposes.

The Warden or PREA Compliance Manager assesses, determines, and documents whether adjustments are needed to the staffing plan, deployment of video monitoring systems, or other monitoring technologies, and determine the resources the facility has available to commit to ensuring adherence to the staffing plan.

In addition to and along with other rounds, Supervisors conduct and document unannounced rounds on the night and day shift to identify and deter staff sexual abuse and sexual harassment. Staff is prohibited from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to legitimate operational functions.

Each Warden develops a PREA staffing plan and submits annual updates to DPS&C's PREA Coordinator. The staffing plans determine and document whether adjustments are needed to the staffing plan, deployment of video monitoring systems or other monitoring technologies, and the resources the facility has available to commit to ensuring adherence to the staffing plan.

In addition to rounds specified in institutional policy, the Warden requires both intermediate-level or higher-level supervisors to conduct and document unannounced rounds on all shifts to identify and deter staff sexual abuse and sexual harassment. The policy prohibits staff from alerting other staff members that these supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the unit.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This facility does not house youthful offenders.
	All offenders under the age of 18 years housed in any state correctional facility are considered youthful offenders (YO) and Department policy statewide recognizes that:
	· No youthful offender may be placed in a housing unit in which the offender will have contact with any adult offender through use of a shared day room or other common space, shower area or sleeping quarters;
	· Outside of housing units, the Department shall either maintain "sight and sound separation" between youthful offenders and adult offenders to prevent adult offenders from seeing or communicating with youthful offenders or provide direct staff supervision when youthful offenders and adult offenders are together.

# 115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Cross-gender strip searches and cross-gender visual body cavity searches are not being done but would be documented in the appropriate logbook and an Unusual Occurrence Report (UOR) would be completed. Cross-gender strip searches or cross-gender visual body cavity searches (a search of the anal or genital opening) would not be conducted except in exigent circumstances.

Interviews with both staff and offenders stated that offenders are able to shower, perform bodily functions, and change clothes without non-medical staff of the opposite gender viewing their buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine rounds. Upon entering a housing unit, all cross-gender staff announces their presence. During the facility tour, opposite gender announcements were made in all areas. It is additionally noted that opposite gender direct supervision in housing areas is rare, and this information was provided in both staff and offender interviews as well as documented on the staffing rosters.

All offenders communicated that appropriate announcements were made by opposite-gender staff as required by the standard and they were never naked in full view of staff, (although it was noted that opposite-gender staff rarely work in housing or showering/toileting areas). Through interview and observation, it was verified that some privacy screens are used in the shower and toileting areas and there were no cases of viewing that were non-security related.

No search or physical exam is permitted when the sole purpose of the search or physical exam is to determine the offender's genital status. Random staff and medical staff both stated in interviews that only medical staff could perform any similar examination.

All correctional security staff is trained to conduct cross-gender pat-down searches and searches of transgender and intersex offenders in a professional and respectful manner, in the least intrusive manner possible while maintaining good security practices.

No female offenders are confined here, this element is Non-Applicable. Cross-gender pat searches are authorized for use with male inmates and staff is trained to perform them, however, strip and body cavity searches are not authorized except in exigent circumstances.

# 115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Policies B-08-010 (Americans with Disabilities Act) and B-08-018 (Effective Communication with the Hearing Impaired) are two of the major pieces of guidance from the Departmental level.

DPS&C Policy is that all facilities take appropriate steps to ensure that offenders with disabilities (including, for example, offenders who are deaf or hard of hearing, those who are blind or have low vision, those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the DPS&C's efforts to prevent, detect and respond to sexual abuse and sexual harassment. RLCC meets these requirements and takes a number of additional steps due to the growing number of older offenders with numerous challenges.

- RLCC provides interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. (§115.16(B))
- Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department does not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first- response duties or the investigation of the offender's allegations. Inmate interpreters have not been used to obtain information in regard to an allegation.

DPS&C utilizes LinguaLinx Interpreting Services for foreign language interpreting needs and each facility has provisions to purchase this service.

Appropriate steps are required to ensure that offenders with disabilities deaf, hard of hearing, blind, have low vision, intellectual disabilities, psychiatric disabilities, speech disabilities, limited English proficient, or limited reading skills), have an equal opportunity to participate in or benefit from all aspects of the facilities efforts to prevent, detect and respond to sexual abuse and sexual harassment. Written materials are provided for offenders with hearing disabilities, access is provided through LinguaLinx or Google Translate for non- or limited English proficient offenders and video presentations are available for offenders with limited reading skills as well as staff assistance. The facility has contracted for the use of the above-noted language line to use as needed to ensure that any offender with limited English proficiency has the ability to communicate as needed and to ensure clear effective communication of any needs or concerns. During interviews with multiple offenders who were limited-English proficient, all expressed that they received and understood all information provided in regard to PREA requirements, safeguards, preventative actions, reporting and response procedures, and that staff took appropriate time to ensure all needs were met and a clear understanding of the facility's policy regarding PREA was communicated.

The PREA information pamphlet is available in braille as well as in audio format for offenders that are blind or have low vision.

# 115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

As indicated by interviews with the PREA Compliance Manager and the Human Resources (HR) staff member, and review of 8 randomly selected personnel files, RLCC does not hire, promote, or enlist the services of any contractor who may have contact with offenders who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institutions. Per policy, there shall be no hiring, detail or promotion of an applicant, employee or contractor 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;
- · Has been civilly or administratively adjudicated to have engaged in the above conduct.

Any incidents of sexual harassment are a determining factor as whether to hire or promote, or to enlist the services of a contractor.

Prior to hiring, detailing or promoting any employee/applicant or enlisting services of a contractor who may have contact with offenders RLCC conducts criminal background checks in accordance with Department Regulation A-02-022.

Prior to hiring, the Human Resources Office contacts each applicant's prior community confinement facility, jail, lockup, and/or prison employers. An Authorization to Contact Previous Employers is required and completed by all applicants prior to the effective date of hire. Applicants for hire, detail to special duty, or direct promotion must also answer these questions prior to the effective date of hire or promotion.

All applicants (including promotions) are required to answer verbal and written questions relative to previous misconduct described in 115.17(a), according to interviews with supervisory and HR staff. Applicants must notify Human Resources if or when such charges have been brought against them. Current employees must notify their immediate supervisor. The form "PREA Requirements for Applicants and Employees Being Considered for Hire, Detail to Special Duty and/or Promotion" is utilized upon hire for this purpose.

Each employee has a personal responsibility to disclose to the Warden within 72 hours, any such conduct of which he/she accused, charged, and/or convicted. Applicants and employees who fail to disclose this information are subject to disciplinary action up to and including termination.

Unless prohibited by law, information regarding substantiated allegations of sexual abuse or sexual harassment involving current or former employees upon receiving a request from a community confinement facility, jail, lockup, prison, juvenile facility, or other institutions for whom such employee has applied to work is provided.

Human Resources staff ensures a criminal history check is conducted at the time of application submission and at least once every five years for employees. Business office staff ensure annual criminal history checks are conducted on all contractual employees. The Volunteer Services Coordinator (Chaplain) ensures that, prior to approval as a volunteer, a criminal history check is conducted on volunteers and every two years thereafter.

There have been 90 persons hired this past year who had criminal background checks and there were also 5 service contract staff where criminal background checks were conducted. Both random staff interviews and contractors interviewed indicated these had been done and they were aware of them when they occurred.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	RLCC has received recent-year State DOC funds for some PREA upgrades. The warden and PREA Coordinator both indicated that part of the funding is being used to install fiber optic cable, a project nearing conclusion this summer and that this will enable the significant growth in the ability to provide camera coverage and add needed cameras. Each year a review and evaluation are conducted to note any areas of need or best practice in the placement of cameras.
	When designing new units, planning substantial expansions or modifications to existing units or when updating a video monitoring system, the Warden stated he does consider how such expansions, modifications, or updates would enhance the unit's ability to protect offenders from sexual abuse.

# 115.21 Evidence protocol and forensic medical examinations Auditor Overall Determination: Meets Standard Auditor Discussion

#### **RLCC Evidence Protocol and Forensic Medical Examinations Policy:**

- The Investigative Service Office investigates allegations of sexual abuse and follows evidence collection protocols as outlined in RLCC policy 02-01-007 – Crimes Committed on the Grounds of RLCC.
- All victims of sexual abuse have access to a forensic medical examination either on-site or off-site at a local hospital at no cost to the victim, where evidentiary or medically appropriate.
- Examinations performed will be conducted by individuals that have received Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) training or by qualified medical practitioners.
- SAFE and SANE training certificates are provided to the Training Department for training documentation.
- Offenders who are victims of sexual abuse have access to victim advocates on staff and to staff at the local community rape crisis center, St Landry-Evangeline Sexual Abuse Center.
- Offenders may request a victim advocate on staff or from a community-based organization to accompany and support
  through the forensic medical examination, investigatory interview and to provide emotional support, crisis intervention,
  information, and referrals.
- Any investigations that cannot be handled at the facility are transferred to either the Parish Sheriff's Office for handling, and the Sheriff's office uses the same standards of investigation as 115.21 (a) (e)).

RLCC Victim Advocates are qualified staff members or community-based staff from a rape crisis center who have been screened for appropriateness to serve in the role of a victim's advocate and have received education concerning sexual assault and forensic examination issues in general. The assigned investigator immediately notifies a Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred.

The Victim Advocate consults with the assigned investigator and offers assistance to the alleged victim as is appropriate. According to interviews with the PCM, an Advocate, and the investigator, a facility Advocate assists in the facility, and community Advocates can be available at the hospital as needed.

As requested by the victim, the Advocate may participate in supporting victims throughout the forensic medical examination process (ensuring compliance in confidentiality laws) and investigatory interviews and provide emotional support, crisis intervention, information, and referrals.

All conversations between the Victim Advocate and the alleged victim remain confidential except when:

- Disclosure of confidential information is necessary to protect the victim or another (staff or offender) from potential harm: or
- The identity of an otherwise unknown alleged sexual predator is

The Victim Advocate does not prepare or submit an Unusual Occurrence Report based upon conversations or functions performed while in the role of Victim Advocate.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Department has adopted a zero-tolerance policy toward victimization and sexual abuse through the PREA Program. Full investigations, appropriate reporting, and compliance to the standards program are treated as a top priority by administrators and investigators. During the past 12 months, there were 28 allegations of sexual abuse or harassment, and all received administrative investigations, none received criminal investigation.
	The Investigators ensure that an administrative and/or criminal investigation is conducted in all cases of sexual abuse and sexual harassment they receive.
	Claims made which are out of the scope of the training provided to RLCC investigators, or which are determined to involve potential criminal actions, are referred for investigation to the Parish Sheriff's Office, an office that using the elements of this Standard.

# 115.31 Employee training

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility has 326 staff who have contact with offenders and who have received PREA training.

All training on sexual abuse pursuant to the PREA Standards is developed by the DPS&C's Training Director in conjunction with the Chief of Operations, Regional Wardens, the Department PREA Coordinator, and the Department's Medical/Mental Health Director, and includes the following:

- Zero-tolerance policy for sexual abuse and sexual harassment;
- How to fulfill their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- The rights of offenders and employees to be free from sexual abuse and sexual harassment;
- The rights of offenders to be free from sexual abuse and sexual harassment;
- The rights of offenders 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 of threatened and actual sexual abuse;
- · How to avoid inappropriate relationships with offenders;
- How to communicate effectively with offenders including, gay, bisexual, transgender, intersex, or gender nonconforming;

The training provided is geared to adult male offenders. Any employee transfers from a female institution receive a 40-hour orientation to acclimate them to the differences in gender protocols.

All employees are trained annually on PREA and the current sexual harassment policies and procedures and are required to sign a training roster as verification of their attendance and understanding of the training. All current staff and new hire employees sign the Sexual Assault and Sexual Misconduct with Offenders Acknowledgement Form and the Malfeasance in Office Form and both forms are maintained in the employee's personnel file

Employee training regarding all areas of the PREA program is evident as observed during staff and offender interviews. All staff, volunteers, and contractors are well versed in the comprehensive PREA policy and required response procedures. Many staff was observed with a card that is carried on their person at all times listing the required steps in the event that a PREA allegation is reported. All staff is aware of the requirement to report immediately and maintain confidentiality concerning allegations. Staff are aware of the requirement to take all allegations seriously and the procedures required for reports from other confinement facilities.

The Department provides Correctional Officers with refresher training annually, and all other employees refresher training every two years, to ensure that all employees are aware of current sexual abuse and sexual harassment policies and procedures. Curricula were reviewed for new employee training as well as annual training and the training of contractors and volunteers.

All security staff is trained in how to conduct cross-gender pat-down searches, and searches of transgender and intersex offenders, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs.

During orientation and annually thereafter, all staff are trained in the prevention, detection, response, reporting and investigation of sexual abuse.

Training also includes specialized training for medical and mental health staff, as well as for Investigators. Medical staff employed by the agency have received appropriate training to assist them in arranging for the conduct of forensic examinations but they do not perform them. The agency documents that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere.

Medical and mental health care practitioners also receive the training mandated for employees under §115.31 or for contractors and volunteers under §115.32, depending upon the practitioner's status at the agency.

# 115.32 Volunteer and contractor training Auditor Overall Determination: Meets Standard **Auditor Discussion** All 69 volunteers and contractors who have offender contact were trained in the required PREA procedures and policies. RLCC volunteer and contractor numbers are substantially reduced this past year due to the impact of COVID restrictions on many facility programs and schedules. Volunteer, Intern, and Contractor Training Policy: The Department ensures that all volunteers, interns, and contractors who have contact with offenders have been trained on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. All volunteers, interns, and contractors must sign the Sexual Assault and Sexual Misconduct with Offenders Volunteer Acknowledgement Form stating that they understand that any violation shall result in disbarment from the prison and may include the filing of criminal charges as warranted. The Chaplain oversees volunteer training, and the Training Department oversees staff and interns '/student workers' training and is also responsible for ensuring that all who have contact with offenders receive training on their responsibilities. Interviews with the Chaplain, random staff, and the PCM indicated that contractors and volunteers are informed prior to the awarding of the contract and prior to their approval of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Contractors and volunteers are required to sign the Sexual Assault Sexual Misconduct with Offenders form (kept in their personnel files). Violations of this policy serve as grounds for revoking the contract and terminating the volunteer(s) access. Contractors and volunteers are also responsible for reporting incidents of sexual abuse and sexual harassment. The facility maintains documentation confirming the training the volunteers, interns, and contractors received. Forms for volunteers are maintained by the Volunteer Services Coordinator (Chaplain), and by the Business Office for contractors. The

level and type of training provided to volunteers, interns, and contractors are based on the services provided and level of contact they have with offenders, but all who have contact with offenders are notified of the zero-tolerance policy regarding

sexual abuse and sexual harassment and informed of the procedures to follow to report such incidents.

## 115.33 Inmate education

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

At intake, offenders receive information on the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

The day after intake, (excluding holidays), offenders are scheduled for orientation where they receive required information on their right to be free from sexual abuse and sexual harassment; to be free from retaliation for reporting incidents, and procedures for responding to incidents.

Each time an offender transfers, this information is repeated at the new institution, and the offender signs a new Intake Sheet, and this was verified in numerous offender interviews as well as offender file reviews. Each offender orientation includes verbal and written training information regarding sexual assault and sexual misconduct, including:

- · Prevention:
- · Self-protection;
- Multiple channels of reporting sexual assault and sexual misconduct;
- Protection from retaliation;
- · Treatment and counseling;
- DPS&C zero tolerance for sexual assault and sexual misconduct.

The facility utilizes different formats to ensure offenders understand the information that is being presented, including;

- Offenders who are limited English proficient;
- · Offenders who are deaf;
- Offenders with visual impairment; and
- · Those offenders who show signs of other disabilities including those with limited reading skills.

Classification staff documents these education sessions and this information is readily available via posters and in the offender handbook.

Offenders received at Laborde are there for longer terms so short turnovers are relatively rare. Of the 334 offenders received in the past year, all 334 received comprehensive education since their stays were all 30 days or longer. Policy requires that offenders at all institutions receive information concerning sexual abuse during offender orientation at their respective permanent housing unit upon intake. In addition, each offender receives one hour of annual training regarding sexual abuse and reporting.

Offenders were familiar with the facility PREA program as well as the methods of reporting, hotline number, and ways to prevent abuse. A majority of the offenders interviewed outlined the annual frequency of the training provided to them. Information provided to the offenders concerning PREA is provided verbally and in hard copy format in the offender handbook, handouts and posters. Several offenders with cognitive difficulties were interviewed and they expressed that staff spent additional time to ensure they explained all requirements and that they understood. The offenders and staff were aware of PREA and the zero-tolerance policy of the Agency. Offenders interviewed were knowledgeable about how and where to report sexual abuse and sexual harassment. They all indicated they had received written information regarding reporting either on their arrival or on the housing units. LGBTI offenders interviewed reported that they felt safe and a significant number of older offenders responded in a similar vein. All staff and offenders interviewed were cooperative during the interview process.

Certified offender interpreters may be used to explain the policies and procedures for reporting; however, the Department will not rely on offender interpreters, offender readers or other types of offender assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety, the performance of first-response duties or the investigation of the offender's allegations.

The Department utilizes LinguaLinxTelephone interpretation services or Google Translate for all foreign language interpreting needs.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Interview with the Head of DOC Investigations as well as the 2 facility investigators support adherence to this training requirement. The Head of DOC inspections provided extensive training to all DOC investigators this past year and made the training available to some local Louisiana jurisdictions as well.
	Investigators receive training in conducting sexual abuse and sexual harassment investigations in a confinement facility.  Investigator and Deputy Warden interviews confirmed that his training includes:
	<ul> <li>Techniques for interviewing sexual abuse victims;</li> <li>Proper use of Miranda and Garrity warnings;</li> <li>Sexual abuse collection; and</li> <li>Criteria and evidence required to substantiate a case for administrative action or prosecution referral.</li> </ul>
	Training includes that offered by DPS&C and training offered by the National Institute of Corrections. Documentation of this training is retained in the Training Department for training credit and documentation.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The 42 medical/mental health staff were all (100%) trained in current agency and PREA policy, including the following:
	To detect and assess signs of abuse;
	To preserve physical evidence of sexual abuse;
	To respond effectively and professionally to victims of sexual abuse and sexual harassment;
	How to report allegations or suspicions of sexual abuse and sexual harassment.
	In addition to the specialized training requirements and the requirement to complete NIC training related to this area, medical and mental health staff receive the training required for all staff, as do contract medical and mental health personnel. During orientation and annually thereafter, all staff receives training in the prevention, detection, response, reporting, and investigation of sexual abuse. The staff interviewed indicated training was very useful to them. They felt that offenders here are safe and receive few indications of offenders fearful or concerned about sexual safety.
	The agency maintains documentation that medical and mental health practitioners have received the required training referenced in this standard either from the agency or elsewhere.

# 115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

At intake, all offenders are screened to assess their risk of being sexually abused or abusive toward other offenders. The screening is normally conducted the day of arrival but no later than 72 hours after arrival at the facility and utilizes DPS&C PREA intake forms and processes.

Several of the staff interviewed about this area, both random and specialized, and including intake and Mental Health staff, noted the recent years' addition of the mission to serve as a DOC reception center, and the requirement to do more intake processes than previously. Interviews with the medical and mental health staff, PREA Compliance Manager, and the Intake Supervisor indicate screening has greatly improved in recent years. The intake process includes staff from Security, Classification, Medical, and Mental Health who meet with each new arrival to determine routine assessment as well as whether there are any immediate situations that need to be addressed.

A steadily increasing population of older offenders with fairly serious medical needs has placed challenges on the RLCC medical department and facility PREA assessment efforts to ensure the safety of this sometimes more vulnerable population. During the 1980s and 1990s, Louisiana went through numerous years of handing out really lengthy, often life without parole, sentences, and these offenders are now aging into significant medical issues.

DPS&C's PREA Screening Checklist is a strong tool that includes the following:

- Whether the offender has a mental, physical, or developmental disability;
- · The age of the offender;
- The physical build of the offender;
- Previous incarcerations;
- Exclusively nonviolent criminal history;
- Whether the offender has prior convictions for sex offenses against an adult or child;
- Whether the offender is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- Has the offender previously experienced sexual victimization;
- The offender's perception of vulnerability;
- Whether the offender is detained solely for civil immigration purposes.

In addition, the screening also includes:

- · Prior acts of sexual abuse:
- · Prior convictions for violent offenses;
- When known, to the facility: history of prior institutional violence or sexual abuse.

No offender is disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked on the PREA Screening Checklist. Offenders are informed that any information given in response to questions asked is of a confidential nature and will not be disseminated in any way that will be exploited to the offender's detriment.

The mental health supervisor interviewed indicated that, at the 14-day mark, each offender is reassessed by mental health for risk of victimization or abusiveness, possibly earlier based upon any additional, relevant information received by the facility since intake. An offender(s) risk is always reassessed when warranted due to referral, request, the incident of sexual abuse, or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness. Annual reassessments are conducted of all offenders per RLCC and DOC policy. Three offenders reported their annual assessment was an impersonal filling out of a form and included no classification staff personal contact but all other offenders interviewed reported an in-person process and verified that it was annual. If a reassessment occurred without staff in-person participation, it may be in an isolated unit and leadership should reaffirm to all units the need for staff in-person involvement in this process.

All 334 offenders received were here longer than 72 hours received the required reassessment within less than 30 days, the standard for the Mental Health staff being 14 days.

RLCC uses the LA DPS&C **PREA Screening Checklist**, an assessment tool utilized to assess an offender's probability of being a PREA Blue High-Risk Sexual Victim (HRSV), a PREA Red High-Risk Sexual Predator (HRSP) or, if neither, classified as PREA Green.

• PREA Blue HRSV: Based on the Checklist, any offender within the custody of the DPS&C who has been identified as

- an individual who has been confirmed as a sexual victim or appears to be at high risk for sexual abuse
- PREA Red HRSP: Based on the Checklist, any offender within the custody of the DPS&C who has been identified or confirmed as an individual with the propensity to sexually assault
- PREA Green: Based on the Checklist, any offender within the custody of the DPS&C with no significant risk of sexual victimization or sexually predatory

Decisions concerning housing assignments, jobs, and group activities for PREA Blue HRSV and PREA Red HRSP offenders are the responsibility of the initial Classification process at each receiving institution and are based on the Checklist, record review, prior facility behavior, and current behavior. Reception center staff enter results of the Checklist in the Offender Management System. Consideration concerning housing, including possible single-cell placement, is determined by the Classification Board based on the initial screening information for those offenders confirmed/deemed PREA Blue HRSV and/or PREA Red HRSP. Although a joint staff endeavor between Classification and Security, Security is the primary driver of initial housing decisions. If mental health intervention is indicated, a referral is made by the Board to a mental health professional. Mental Health staff also interview offenders at Intake and can ensure expediting referral for mental health services.

Transgender or intersex offender housing and programming assignments are considered on a case-by-case basis as to whether a placement would endanger the offender's health and safety or present management or security problems. Transgender offenders can shower separately and each unit documents a Shower Preference Statement. Questions regarding the identification of a transgender or intersex offender's genital status are referred to DPS&C's Medical/Mental Health Director for review and, if needed, determination if a physical examination in a private setting by a health care provider is necessary.

One transgender offender reported in his interview that he had been medically diagnosed with Gender Dysphoria but that the DOC HQ Board responsible for decisions about his treatment had taken no action. A review of his record was unable to locate any such determination.

The Warden needs to ensure that this case has been properly referred to DOC HQ and that guidance is received as required by DPS&C policy or is implemented if it has been received.

MH (Mental Health) Screening, including PREA assessment, is conducted on all transfers, at the time of admission to RLCC, by mental health trained or qualified MH care personnel. MH Appraisals are conducted within 14 days of admission to a DOC reception center. Offenders designated by the reception center appraisal process, or who exhibit mental health symptoms upon arrival at a new institution, receive a comprehensive evaluation by a Licensed MH professional in addition to the required mental health screening.

No offenders were reported as held solely for immigration status but policy exists to provide required assessment and information to them if present in the population.

# 115.42 Use of screening information

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Once an offender is determined as a PREA Blue HRSV and/or PREA Red HRSP at any time during incarceration, the offender is evaluated by the Classification Board for appropriate housing and programs and referred to a mental health professional. The mental health professional meets with the offender upon receipt of the referral to offer services and encourage programming.

The screening information is used as follows to keep separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive:

- · Housing assignments;
- · Bed assignments;
- · Work assignments;
- Education assignments; and
- · Program assignments.

One area done well at Laborde is that the management plan ensures the Control Center notifies all Lieutenants over housing areas with identification of HRSP and HRSV offenders to ensure the groups are kept separate. In order to achieve effective management of these offenders, each time a PREA Blue HRSV and PREA Red HRSP offender's housing location is changed, his PREA designation will be provided by the sending housing unit to the receiving housing unit. This information is verified with Control Center prior to the offender being moved. On Mondays, when new bed assignment print-outs are sent to the dorms, the PREA codes are compared again to ensure accuracy.

Individualized determinations are made to ensure the safety of each offender by the Reception and Diagnostic Centers, which determine placement in a DPS&C facility. Once at RLCC, the facility does not place lesbian, gay, bisexual offenders on a tier solely on the basis of such identification or status and auditors found them located across the entire housing spectrum. Offenders and staff interviewed also validated that housing of LGBTI offenders is across all housing.

Placement and programming assignments for transgender and intersex offenders are reassessed twice each year to review threats to safety that may have been experienced by the offender. DPS&C C-01-022 Form O (Transgender/Intersex Reassessment) is utilized. The views of the offender with respect to their own safety are given consideration. Transgender offenders interviewed confirmed the policy, that Classification and review staff follow this schedule, and indicated no concerns in regard to the procedures utilized for searches or the option of showers at a separate/designated time.

Transgender offenders are given an opportunity to shower separately from other offenders by completing a Shower Preference Statement but few choose this option as showers are relatively private anyway.

Mental health staff interviewed indicated that services for PREA Blue HRSV offenders focus on issues related to treatment for and prevention of victimization. DPS&C's Medical/Mental Health Director is tasked to ensure that the institution employs or has access to the services of a licensed mental health professional who has a scope of practice, training, and/or experience in trauma counseling.

Mental health services for PREA Red HRSP offenders focus on alleviating the offender's propensity for predatory or aggressive sexual behavior and sex offender treatment is often offered to these offenders if appropriate.

Classification staff interviewed indicated that the Director of Classification is notified at intake by the Initial Board or by any staff member thereafter who identifies an offender as a PREA Blue HRSV and/or PREA Red HRSP. The Director of Classification ensures that this information is entered into the offender's Annual Assessment, Master Record and in the mental health section of the offender's medical record for monitoring purposes. Each facility reviews the offender's PREA designation prior to any housing, job, or program reassignment in order to make an individualized safety determination.

# 115.43 Protective Custody

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

**DOJ Purpose of the Standard:** "To ensure that facilities do not automatically, or routinely involuntarily segregate inmates alleged to have suffered sexual abuse or restrict their access to programming or other available activities, recognizing that any form of involuntary segregation and restrictions to programming or other privileges can be experienced as punitive by inmates.

To ensure that inmates at high risk for or who have alleged to have suffered sexual abuse are not placed in involuntary segregated housing unless no available alternative means of separation from likely abusers exists. The standard further intends that segregated inmates have access to programs, education, and work opportunities to the extent possible and requires facilities to document any limitations on these rights and periodically afford the inmate with a review to determine the continuing need for separation."

The RLCC PREA Coordinator advises that no offenders were held in involuntary protective custody for assessment during the past 12 months and all required standards/protocols are in existing policy if it occurs. "Offenders placed in Segregation in these cases were related to either investigative or disciplinary reasons. These placements were not related to the PREA claim for protection." The RLCC response also indicates that, in the absence of such use, no programs were limited or interrupted.

There were 2 problems perceived by the Auditor with this approach as presented.

First, offenders are in fact clearly placed in involuntary restrictive housing for protection, which was evident in numerous interviews of both staff and offenders, including senior staff. Additionally, while DPS&C/DOC policy mirrors the DOJ approach of minimizing or avoiding protective custody use, the RLCC PREA policy of 7-1-20 Section 21 clearly specifies that segregation is automatic; and, in fact, says it is to provide safety to the offender; and the policy states that it is the only reasonable alternative available. Given that the likely predator would be segregated during the investigation, and this would ensure separation of predator and victim, this would largely eliminate a need to segregate victims, especially as an automatic policy-driven decision. The RLCC approach is similar to older correctional policies nationwide that segregate all offenders involved in any offense during the investigation but is contrary to DOJ PREA guidance.

Second, according to staff and offender interviews, victims routinely go through a type of disciplinary process and are usually placed in lockdown status at the "request of staff" for protection and an investigation, sign an appearance waiver, and are routinely deemed to plead not guilty. This does not appear to be a genuine disciplinary process but more an effort to regulate automatic segregation of victims for protection, contrary to the core of this standard's intent and goal. And calling it investigation or discipline does not change the fact it functions as Involuntary Protective Custody. A further, minor, factor affecting this is the terminology: the historical DOC approach in numerous prisons has been to use "Protective Custody" as a specific decision and custody primarily used for high-visibility offenders and so PC is frequently not seen as related to PREA victim allegations.

This current process is perceived by offenders to be, and is, a clear deterrent to reporting of abuse by offenders, all of whom understand that victims go into a lockdown status also, not just the predators. Offenders, both in the general population and in segregated status, were consistent in believing that the RLCC process deters reporting because victims are also placed in lockdown status and occasionally remain there for some period even after investigators conclude the investigation and clear them for return to their unit. This is clearly the opposite of the PREA DOJ intent for this Standard, which is supposed to encourage safe reporting of abuse and harassment, not deter it.

It appears this entire process clearly falls under this Involuntary Protective Custody Standard and must include, at a minimum the required initial hearing to assess whether or not alternatives exist and whether segregation is even necessary at all for a victim. There are also mandated hearings on the need for continued segregation in order to ensure the earliest return to general population housing.

LA DPS&C and DOC have a management form "24-hour Review of Involuntary Segregation Status During PREA-Related Investigation" that prisons utilize to document minimizing the offender's stay in restricted housing if it is used, but the facility position is that Involuntary PC is not used here. RLCC policy indicates regular reviews of offenders segregated for their safety at the 7-day and 30-day marks, the same standard as discipline cases.

It appears that this process was designed to provide some structure to an automated process but, regardless of intent, this process appears counterproductive and not aligned with the intent of the DOJ or the LA DOC Standard. RLCC needs to reassess this entire process with the goals of not segregating victims unless other choices are unavailable; only segregating victims until separation from the alleged predator can be arranged; returning victims to their unit at the earliest possible time; if determined individually that PC is needed, returning the victim to the general population as soon as the investigation has concluded; conducting status hearings as mandated when a victim is segregated, and not involving victims in a disciplinary

process at the onset of an allegation, but only if an offender's allegations are subsequently determined false and a deliberate violation of the rules.

In addition, an offender placed in segregation because of a risk of sexual victimization is required to have access to programs, privileges, education, and work opportunities commensurate to offenders in the general population. Documentation must be maintained indicating which opportunities were limited, the duration of the limitations, and the reasons for the limitations. This process does not appear to be currently observed because of the substitution of a disciplinary standard in place of an Involuntary Protective Custody standard. These need to be put in place and provided.

As of August 12, 2021, the following actions were taken. The Warden has directed that staff utilize LA DOC form OP-A-14-p (24 Hour Review of Involuntary Segregation Status During PREA-Related Investigations) PRIOR to placement in any segregation for any PREA-related claim or allegation. The Warden states in his guidance that the objective of the facility is to attempt to place only those offenders in this housing who have a protective concern. The facility provided the Auditor committee forms dating back over 6 weeks to demonstrate their adoption and use and the Auditor requested that these forms be uploaded into OAS by the facility to show their compliance. Additionally, the forms are instructing staff as to any limitations on programming for those involuntarily segregated and state that these offenders will be provided privileges allowed for all offenders in this status. Existing DOC and RLCC policy, and interviews with the Warden, Deputy Warden, Assistant Warden, and PREA Compliance Manager all stated that policy and practice are that programming for such offenders continues. The form allows, and the PREA Coordinator indicated, that restrictions would be specified in cases where that is required.

**Corrective Action:** The facility revised its policy to incorporate required safeguards and process and, after coordination with the auditor, was determined to still remain unclear on a few salient points. A second re-write was very well done and the Warden's intent is now clear, the same intent and expectation he had made clear in his interview and in line with his support for LA DOC PREA policies.

RLCC Policy 02-02.- 022 regarding Custody Levels and Segregation, dated 09.07.2021, in Section 6, Procedures, states "Offenders who are placed In Restrictive Housing for protective custody must be reviewed within 72 hours by the Disciplinary Board and may be released in accordance with the procedures outlined in RLCC P&P 02-02-023, Protective Segregation." The PREA Coordinator also provided copies of Board decisions returning offenders to their general population status or a reduced status after Board consideration and review. the policy also clarifies privileges for Involuntary Segregated offenders and states "Offenders in Preventative and Investigative Segregation have access to programs and services that include, but are not limited to the following: educational services, commissary services, library services, social services, behavioral health, and treatment services, religious guidance, and recreational programs.

RLCC staff has resolved this policy guidance and process issue and is compliant.

# 115.51 Inmate reporting

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

With 2 exceptions, offenders interviewed felt that staff would take very seriously any report of sexual abuse, assault, harassment, or retaliation. Those 2 offenders felt that they personally would need to report to more senior staff to obtain the needed response to an allegation. Randomly selected offenders and staff were able to communicate multiple methods of reporting and a majority stated that they would feel comfortable directly reporting to staff members. All offenders made mention of the reporting 'hotline' phone number; the location of the posters. Virtually every offender interviewed stated they had received information in regard to PREA upon intake and were asked questions in regard to their history on a regular (at least annual) basis. Several offenders knew they had received the information but had been there for a number of years and could not recall where they first learned it.

Offenders may verbally, in writing, or anonymously report sexual abuse and sexual harassment. Staff who are notified by an offender of sexual abuse and/or sexual harassment will follow directions provided on the back of their identification cards, which include first responder steps as well as completing an Unusual Occurrence Report detailing the incident.

Staff in random interviews were aware in every case that they are required to report sexual abuse and sexual harassment and may do so anonymously. Almost all staff indicated they would not need to remain anonymous and would simply use their chain of command although a few said they would use mail or Crime Stoppers. Staff members who would use the chain of command routinely indicated they'd convey the information to a Lieutenant or higher rank staff. Staff interviewed also noted that offender families, friends, or attorneys could also report concerns to the facility or the PREA Compliance Manager, and could also do it in ways that maintained anonymity, such as mail or Crime Stoppers.

Offenders at RLCC may report sexual abuse and sexual harassment, retaliation by other offenders or staff, and staff neglect that may have contributed to an incident through the Administrative Remedy Procedure (ARP); via letter through institutional mail or regular mail; filing a grievance; or by calling Crime Stoppers. Crime Stoppers Baton Rouge is the reporting agency for Laborde telephone reports.

Offenders may verbally, in writing, or anonymously report sexual abuse and sexual harassment. Staff who are notified by an offender of sexual abuse and/or sexual harassment will follow directions provided on the back of their identification cards, which include first responder steps as well as completing an Unusual Occurrence Report detailing the incident.

Staff in random interviews were aware in every case that they are required to report sexual abuse and sexual harassment and may do so anonymously. All staff indicated they would not need to remain anonymous and would simply use their chain of command.

## 115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Within the past 12 months, there were 5 uses of the grievance process (ARP) for an allegation of sexual abuse, and the responses were all within the 90-day window allowed. There were no grievances alleging the danger of imminent sexual abuse during this period.

Offenders may use the Administrative Remedy Procedure (ARP), grievance, or any informal method to report sexual abuse and/or sexual harassment. The Department does not require an offender to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The offender's report does not have to be submitted to the staff member who might be the subject of the complaint. Grievances may also be placed in institution mail. The investigation of the accusation(s) is not referred to the staff member referred in the grievance.

A decision on the grievance relating to sexual abuse and/or sexual harassment is required to be made within 90 days of the initial filing of the grievance. The offender is notified in writing of any extension in time that is needed to respond and the approximate date. If a response is not received at any level of the grievance process an offender should consider this as a denial at this level.

Offenders may use the Administrative Remedy Procedure (ARP), grievance, or any informal method to report sexual abuse and/or sexual harassment. The offender's report does not have to be submitted to the staff member who might be the subject of the complaint. Grievances may also be placed in institution mail. The investigation of the accusation(s) is not referred to the staff member referred in the grievance.

Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates are permitted to assist offenders in filing requests for administrative remedy as it pertains to sexual abuse or sexual harassment. Third-party reporting filed on behalf of the offender requires the offender to agree to proceed as a condition of processing the request. If the offender declines to have the request processed the offender will complete the ARP Drop Form.

RLCC has in place a required procedure for filing emergency grievances alleging an offender is subject to a substantial risk of imminent sexual abuse. These grievances are filed with the Unit, and the manager speaks with the offender to determine the nature and severity of the threat. The offender is provided an initial response within 48 hours and a final response within 5 calendar days, excluding weekends and holidays. The decision on the grievance determines whether the offender is at any substantial risk of imminent sexual abuse. The facility documents the actions taken in response to the emergency grievance and the final decision of actions taken.

If determined that an offender filed the grievance with malice, the offender can be disciplined. No offenders were disciplined this past year for filing a grievance in bad faith.

# 115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

**Purpose of the Standard:** To provide inmates with access to emotional support services from **outside** the facility to help inmates heal from trauma. Access to outside support is important because inmates may be reluctant to seek emotional support from within a facility, and some facilities may lack resources to provide counseling services. A victim will most benefit from a trained support person who can provide a safe environment for discussing issues related to abuse **confidentially**.

Although external emotional or victim support service providers are different from the external reporting entity required by Standard 115.51(b), they can assist an inmate in deciding how and/or whether to report abuse to a facility, to receive support for abuse that occurred prior to confinement, and to understand what to expect in an investigation. These providers can also help an inmate to become emotionally ready to make a report, which can enhance safety overall in a facility. Note that Standard 115.53 makes clear that external support providers or crisis agencies are intended to deal exclusively with the offender victim and they should not be expected to forward abuse reports to a facility.

In actual practice, the Victim Advocate from the LAFASA (LA Foundation Against Sexual Assault) Crisis agency STAR-(Sexual Trauma and Assault Response) reported in their interview that they advise offenders who bring up an allegation to contact the RLCC PREA Coordinator since the STAR role is to support and counsel, not to be a reporting agency. They also noted that their annual referrals mainly come from the hospital and the facility, not from an offender directly.

When questioned about the process for advising offenders of how to contact outside confidential support services, the facility's response is "All offenders that make sexual abuse or harassment allegations are brought into the Investigations Department for questioning and presentation of available resources. At that time a staff member speaks with the offender and offers assistance in the form of assistance of resources available from RLCC and/or other sources if the offender is not willing to speak with the staff member presented. Also, if the offender is brought to Cabrini Hospital for examination (rape kit) he is presented with additional information related to resources available." The policy also notes that any offender who is confined for any immigration-related offense would be provided contact data for the appropriate Embassy or Consul, etc.

The STAR interview indicated that they do provide Victim Advocate agency contact information to offenders who are sent to the hospital for forensic examinations and that the information is provided when the offender is returned back to RLCC.

It was observed during the Site visit that although Crime Stoppers posters were adjacent to virtually every unit phone and in numerous other areas, similar information on contacting the Crisis agency was not in evidence. Only one offender of some 50 interviewed had any awareness of community support available and that was due to having met advocate personnel at the hospital. St Landry-Evangeline Sexual Assault Center agreed in a 2015 MOU to provide their address to offenders for sexual assault-related services, counseling, etc. but this address was not observed posted in the same areas as Crime Stopper Reporting information.

Offenders are placed on notice that all telephone calls are monitored with the exception of properly placed privileged calls between an offender and his attorney. Reports of abuse are always forwarded to Investigations and so these calls are also not confidential, although they are going to a crisis agency with Statewide guidance and MOU's with the facility and with DOC. RLCC has an agreement with St Landry-Evangeline Sexual Abuse Center that is able to provide crisis counseling. Offenders are apprised of this confidentiality restriction and limitation.

It is noted that the Purpose of the Standard clearly indicates that the DOJ expectation is that offenders have mail and telephone contact data before any incident, and unrelated to any new incident, since it may help them decide whether to even report abuse at the facility. Additionally, the information is intended to be available for help in seeking support for abuse that occurred in the community prior to confinement.

This process does not appear to meet the intent of the DOJ Standard and should be assessed to determine how to provide community agency contact information, preferably phone and mailing information both, universally to all offenders, either as part of intake, in an offender handbook, or via posters similar to the Crime Stoppers posters, preferably through more than one of these methods. Such an assessment should also consider how these calls can be made more confidential.

AS of the Warden's memorandum to the Auditor of August 12, 2021, a poster has been placed facility-wide that has mailing addresses, but no phone number, for LAFASA (LA Foundation Against Sexual Assault) and JDI (Justice Detention International). The poster placed around the entire facility with the addresses of these agencies also included the statement that such mail was "subject to RLCC offender mail policy and procedures" which appeared to mean it was not confidential or privileged. DOC policy OP-A-15 says commo with Victim Advocates is to be confidential and, as noted above, DOJ policy is to enable confidentiality. RLCC 02-01-15 says 'at time of investigation, will/can be given toll-free telephone numbers which are monitored, so any confidential access would need to be by mail.

Corrective Action: On 9-7-2021, following a virtual conference between the auditor and the senior facility leadership, the Warden issued new RLCC policy 02-03-007 on Offender Mail-Publications and Precautions that clarifies Advocacy Agency mail as privileged. The policy now is that "outgoing privileged correspondence may be posted sealed, and will not be opened and inspected without express authorization from the Warden or Deputy Warden" and that mail addressed to LAFASA and Just Detention International "will be handled as confidential mail."

this issue is now compliant with the Standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Third parties (which may include other offenders, unit staff, family members, attorneys, and outside advocates) may also assist offenders by making sexual abuse harassment reports, and/or initiating formal grievances. However, once this formal grievance process has been initiated by a third party, the offender must authorize the request for remedy and must continue the process in accordance with Department Regulation No. B-05-005 "Administrative Remedy Procedure." The prison documents offenders who decline to continue with the grievance once a third party initiates the process.  RLCC has methods in place to receive third-party reports of sexual abuse and sexual harassment. Individuals may call Crime Stoppers, file a grievance, the PREA Hotline, use institutional ("farm") mail, or use regular mail. Intake information, facility posters, and the PREA handbook provide information to access third-party reporting. When Crime Stoppers is used, that organization then contacts the facility Warden or Deputy Warden. Visiting areas also include reporting procedures and information posted and accessible.
	RLCC has methods in place to receive third-party reports of sexual abuse and sexual harassment. Individuals may call Crime Stoppers, file a grievance, the PREA Hotline, use institutional ("farm") mail, or use regular mail. Posters and the PREA handbook provide information to access third-party reporting. Crime Stoppers then contacts the facility Warden or Deputy Warden. Two offenders reported during random interviews that they were aware of outside reports being done by family members.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident or sexual harassment or retaliation that occurred in the facility.
	Apart from reporting to their designated supervisor, staff have been directed to refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in this policy, to make treatment, investigation, and other security and management decisions.
	Medical and mental health practitioners are required to report sexual abuse as referenced above and the offender is informed of this requirement at the initiation of services and the limitations of confidentiality.
	LA statute requires that the facility report on behalf of adults which are considered vulnerable under the aforementioned statues, any allegations to the designated State or local service agency under mandatory reporting laws.
	All allegations of sexual abuse and sexual harassment are reported to Investigations, including third-party and anonymous reports.
	All allegations of sexual assault, sexual misconduct or sexual harassment by either staff or offender may be reported to any staff member. The staff member who receives such reports, whether verbally or in writing, immediately notify the supervisor who ensures that an Unusual Occurrence Report (UOR) is completed. All PREA related UOR's go immediately up the chain of command.
	Any allegation of sexual abuse is reported to DPS&C's PREA Coordinator and PREA Investigator immediately following the initial notification to the Warden.
	The assigned investigator immediately notifies the Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Immediate steps are taken when the facility learns that an offender might be subject to substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in this process and, in actuality, initial response is virtually immediate.
	When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, they are trained to take immediate action to protect the alleged victim and to assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.
	Offenders who had made reports of sexual abuse stated that staff took immediate action to ensure they were safe while initiating an investigation process and that they provided information about the outcome. All offenders interviewed said they knew how to access services and the grievance process, that they were aware of multiple methods of reporting available, including telling any staff member, utilizing the hotline, reporting to an outside third party, writing to outside agencies, and submitting anonymous reports in writing. This information is also available in facility policy as well as the offender handbook. Those reporting said that they felt comfortable speaking with staff about this matter.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility has received and provided no allegations of sexual abuse from or to other facilities in the past year. Allegations received from other confinement facilities that an offender was sexually abused while confined at RLCC are reported directly to the Warden and the Warden ensures that allegations are thoroughly investigated in the same manner as are all allegations.
	Upon receiving an allegation from an offender that he was sexually abused while confined at another facility, the Warden stated in his interview that he notifies their executive in writing. An email is usually sent from the RLCC warden to the other warden, or from investigator to investigator of the facility where the alleged abuse occurred. Notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and documentation is placed in the offender's Master Record. Documentation of the notification is also logged in the "case" logbook.
	Immediate steps are taken when it appears that an offender might be subject to a substantial risk of imminent sexual abuse.  PREA time limits of 48 hours for initial response and 5 days for resolution are observed in the process.

# 115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The facility reports that there were 28 allegations in the past year that an offender was sexually abused; all cases were reported in enough time for collecting physical evidence, and the required first responder steps were followed in each case. Fourteen were sexual harassment cases, 13 were sexual abuse allegations and 1 was a voyeurism allegation.

These numbers do not appear entirely logical but the facility maintains they're correct. It seems unlikely, for example, that all 28 allegations were followed by separating victim and predator (especially in cases reported individually to non-security staff such as Mental Health); or advising offenders to not take hygiene actions that might alter evidence, including for the 14 cases that were sexual harassment and not physical abuse.

In interviews, correctional officers and staff expressed satisfaction with their PREA training and felt they knew their required actions if incidents were to occur.

All staff interviewed, including non-uniformed staff, were familiar with proper steps and procedures for initial responses to an incident, and all had their PREA card with required first responder steps in their possession.

The first staff member receiving the report/allegation and/or the appropriate supervisor advises the abuse victim not to shower or otherwise hygienically clean; or, if the assault was oral, not to eat, drink, or brush their teeth or otherwise take any action that could damage or destroy physical evidence pending completion of the gathering of that evidence and/or the initial investigation.

First responders secure the alleged crime scene if feasible and if forensic evidence may exist. The only persons allowed to enter a secured crime scene are the assigned investigator(s), medical staff, and/or the Warden, as needed. The crime scene remains secured until released by the investigator.

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

Louisiana law requires all biological evidence collected in cases involving homicide and rape to be held in secure custody indefinitely or turned over to the local Sheriff's Office if they are handling the criminal investigation.

The DOC policy is that the alleged victim will be promptly escorted under appropriate security to the infirmary for assessment. If transporting the alleged victim to the infirmary or a hospital emergency room, the victim is instructed to undress over a clean sheet in order to collect any potential forensic evidence that may fall from his person. The sheet, along with the victim's clothing, is collected as evidence and placed in a paper bag with an appropriate chain of evidence form attached.

When released from the infirmary or emergency room, the alleged victim is to be segregated from the alleged aggressor and screened by a mental health professional with appropriate referrals made.

The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not be determined by the person's status as a detainee or staff, according to policy and training documents, and per interviews with investigators and the PREA Coordinator. Three offenders reported that they had been told that the "credibility of the officer" outweighed their allegation against staff and investigations went nowhere, however, most offenders interviewed felt that the larger issues involve a lack of witnesses needed to resolve many of the allegations.

Alleged aggressors who are offenders are held in segregation pending investigation and remain there until the investigation is complete unless other circumstances require the transfer of the alleged aggressor. Mental Health staff interviewed indicated that offenders accused of predatory behavior are always evaluated by mental health staff prior to the disciplinary hearing of the violation.

RLCC mental health staff evaluate known abusers within 60 days of learning of such abuse history and after treatment when deemed appropriate and documented on the Mental Health Evaluation for Substantiated Cases of Sexual Assault Form.

In every case where the alleged aggressor is a staff member, there is no contact between the alleged aggressor and the alleged offender/victim without the approval of the Warden.

# 115.65 Coordinated response Auditor Overall Determination: Meets Standard Auditor Discussion

Each supervisor and senior staff member interviewed was aware of the steps required by the various parties following any incident and, as would be expected, most line staff were aware of just their own requirements and some of the requirements of their supervisors.

## **Actions Required After Report of Sexual Abuse**

- 1. When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, take immediate action to protect the alleged victim. Staff report and respond to all allegations of sexually abusive behavior and sexual harassment. Assume all reports of sexual victimization, regardless of the source of the report (third party, anonymous, verbal, etc.) are credible and respond accordingly.
- 2. Only designated employees specified by policy should be informed of the incident, as it is important to respect the victim's security, identity, and privacy.
- 3. All allegations of sexual abuse are to be handled in a confidential manner throughout the investigation.
- 4. All conversations and contact with the victim should be sensitive, supportive, and non-judgmental**Initial Response:**Upon the report or discovery of an incident of sexual abuse/sexual assault, the first security staff member to respond shall:
- Intervene in any assaults and separate the alleged victim and abuser.
- · Detain the abuser.
- Call for emergency medical care for the victim, if necessary.
- Immediately notify the supervisor and remain on the scene until relieved by responding personnel.
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
- Request that the alleged victim does not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, defecating, smoking, drinking, or eating.
- Ensure that the alleged victim not take any actions that could destroy physical evidence, including bathing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- If the first responder is not a correctional officer the responder is still required to request that the alleged victim not take any actions that could destroy physical evidence; remain with the alleged victim and notify security staff.
- Apart from responding to designated supervisors, employees are not to reveal any information related to the incident to anyone other than to the staff involved with investigating the alleged incident.
- Document detailed description of:
- Victim and abuser locations and affect (emotions, appearance, etc.)
- Wounds and where they are
- · Anything the victim or abuser reported to you

# Shift Supervisor will follow the below procedures:

- Notify immediately the warden or designee, the PREA Compliance Manager, and the Investigator assumes control.
- Assign an officer to remain at the crime scene to protect the area.
- Attend to the victim. Ensure the alleged victim is assessed by medical staff and housed in the Infirmary Isolation cells. Do not speak loudly or call unnecessary attention to the victim.
- A security staff member is placed outside the cell or area for direct observation to ensure these actions are not performed. The alleged victim must not be left alone until evaluated by Mental Health Staff for suicide risk.
- The alleged abuser remains in the dry cell/area under the direct supervision of a same-sex correctional officer to ensure he does not destroy potential evidence.
- After the investigator has completed the interview, separate and apart from the alleged victim, the alleged abuser is
  referred to medical for further assessment and treatment as deemed necessary by healthcare providers. Visible
  injuries are documented both photographically and in writing and placed in the abuser's medical record.
- Thereafter, the alleged abuser is held in segregation pending further investigation.
- A brief inquiry will be made to each individual separately and apart from each other to determine if the sexual contact was consensual or non-consensual. Note: Designated staff interpreters will be used when communicating with victims with limited English proficiency unless exigent circumstances exist which will be fully documented.
- Ensure all persons who played an active role in the response document their actions, providing as much detail as possible, and ensure that they remain on duty until properly debriefed and relieved as appropriate.
- Ensure referrals to EAP for staff in need of crisis intervention counseling.
- Incidents are fully documented.

- Log Book
- · Security Video
- Photos

### **Facility Crime Scene**

- Start a crime scene log. Everyone who enters the crime scene area must sign the log. Document each person entering the crime scene, the time of entry, and the time of departure. Note: Only person(s) allowed to enter the crime scene is assigned investigators, medical staff, and the Warden or designee.
- Video and photograph the crime scene area before removal of any items from the area.
- Identify staff that will touch and/or handles evidence.

**Notifications Required when Sexual Abuse is Alleged:** Ensure the below notifications are made within two hours of the occurrence:

- Warden
- PREA Compliance Manager
- Investigator
- · Health Care Authority
- Mental Health

For allegations of sexually abusive behavior in which an employee is the alleged abuser, only the Warden and investigator are notified of the specifies of the allegation. They make notifications and referrals to outside law enforcement agencies and licensing boards as appropriate.

Note: In every case where the alleged abuser is an employee, contractor, or volunteer there is to be no contact between the alleged abuser and the alleged victim pending the outcome of an investigation.

# **Evidence Protocol**

If the abuse occurred with 72 hours, procedures will be followed in accordance with RLCC policy 02-01-007- "Crimes Committed on Grounds of RLCC".

# Responsibility when Sexual Harassment is Alleged

Some offender allegations rise only to the level of sexual harassment. For allegations of sexual harassment, responding supervisory staff:

- Ensure that the alleged victim and abuser are separated.
- A brief inquiry will be made to each individual separate and apart from each other to ascertain if the sexual behavior
  was consensual or non-consensual.
- Ensure that the supervisor and the investigator are notified.
- Incidents of this sort are fully documented.
- The incidents are investigated and the alleged abuser may be segregated pending the outcome of the investigation.
- The alleged victim is referred to Mental Health for re-assessment to determine if any issues need to be addressed.
- If the allegation is substantiated, the abuser is referred for administrative disciplinary sanctions and re-assessed to determine if any issues need to be addressed.

# Responsibility When Sexual Activity is Alleged

Not all reports or allegations require a full response protocol. For reports or allegations of sexual activity where the involved offenders independently report a non-coercive consensual sexual encounter, responding supervisory staff:

- Ensure that the involved individuals are separated.
- A brief inquiry will be made to each individual independently to ascertain if the sexual encounter was consensual or nonconsensual
- Notify the supervisor and the Investigator.

- If the Investigator determines the behavior is in fact sexual activity, the involved offenders are referred for administrative disciplinary sanctions. The disciplinary board refers the offender to mental health for an assessment as to whether an offender's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed.
- The involved individuals are always re-assessed to determine if any issues need to be addressed.

In other cases, there may be insufficient reason to proceed (the alleged victim credibly recanted, or the alleged abuser was not in the facility on the date of the allegation, etc.) and the response protocol may be terminated. Incidents of this sort are still reported.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Interviews with the DPS&C PREA Coordinator and an RLCC Contracts staff report that RLCC and LA DPS&C have no contracts or agreements that would limit RLCC's ability to remove the alleged staff sexual abuser from contact with any offender pending the outcome of the investigation or of a determination of whether and to what extent any staff discipline is warranted.

# 115.67 Agency protection against retaliation

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

Purpose of the Standard: "To establish protections for all inmates and staff from retaliation for reporting sexual abuse or sexual harassment and for cooperating with sexual abuse investigations. The standard recognizes the fact that retaliation for reporting instances of sexual abuse, and for cooperating with sexual abuse investigations, is a serious concern in correctional facilities. Additionally, the standard's monitoring requirements provide specifics about who must be monitored following a report of sexual abuse, what issues must be monitored, and the timeline for monitoring. The standard creates a strong detection and monitoring system for these issues which will deter retaliation and will support an effective reporting system."

Retaliation is prohibited by policy in DPS&C. If detected or alleged, the appropriate supervisor is directed to immediately contact the facility investigative section. Staff is trained to also report any claims of retaliation against offenders and other staff for reporting abuse, as well as any staff neglect or violation of responsibility that may have contributed to an incident or retaliation. The Assistant Warden for Administration is responsible for collaborating with the Investigator to monitor retaliation. Interview of the Assistant Warden indicates a system of informal checks and maintaining sensitivity to housing changes, disciplinary reports, job changes, etc.

RLCC policy states that offenders receive a periodic status check for at least 90 days following a report of sexual abuse. The Assistant Warden for Administration is designated for oversight of monitoring for retaliation and the RLCC policy provides for her to coordinate with the Investigators to provide the monitoring. Interviews of both staff and offenders reveal that the Investigators are primarily providing the required monitoring of treatment of staff and offenders who reported tor suffered sexual abuse. If any changes suggest retaliation, the investigator discusses them with the PREA Compliance Manager and Assistant or Deputy Warden in order to remedy any such retaliation. Items monitored include offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.

There are multiple protection measures in place for offenders or staff who fear retaliation for reporting sexual abuse or harassment or for cooperating with an investigation. To the maximum extent possible, staff referenced in an offender's grievance or ARP are moved until the conclusion of the investigation, an administrative safety measure that becomes unnecessary if victims are automatically segregated for their protection. Mental health services are always available to offenders by writing to mental health. Except when RLCC determines that a report of sexual abuse is unfounded, the facility does the following for at least 90 days following a report of sexual abuse:

- Monitor the conduct and treatment of offenders or staff who report sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff;
- Monitor the conduct and treatment of offenders who suffered sexual abuse to see if there are changes that may suggest possible retaliation by other offenders or staff;
- Act promptly to remedy any retaliation

Such monitoring continues beyond 90 days if the initial monitoring period indicates a continuing need. The reason is documented on the PREA Agency Protection against Retaliation for Offenders/Staff Form. If an offender who is being monitored for retaliation is transferred, the PREA Compliance Manager at the sending facility follows up with the receiving facility to ensure continuity of retaliation monitoring.

It is noted that, in reviewing interviews of offenders in lockdown status, those who were placed there as victims because they made an allegation felt that placing them in lockdown, rather than leaving them in their unit, or moving them to another general population unit for safety, was retaliation for making the allegation and designed to discourage reporting of abuse or harassment by offenders.

# 115.68 Post-allegation protective custody Auditor Overall Determination: Meets Standard **Auditor Discussion** Purpose of the Standard: "To ensure that facilities do not automatically, or routinely involuntarily segregate inmates alleged to have suffered sexual abuse or restrict their access to programming or other available activities, recognizing that any form of involuntary segregation and restrictions to programming or other privileges can be experienced as punitive by inmates. To ensure that inmates at high risk for or who have alleged to have suffered sexual abuse are not placed in involuntary segregated housing unless no available alternative means of separation from likely abusers exists. The standard further intends that segregated inmates have access to programs, education, and work opportunities to the extent possible and requires facilities to document any limitations on these rights and periodically afford the inmate with a review to determine the continuing need for separation." As of August 12, 2021, the following actions were taken. The Warden has directed that staff utilize LA DOC form OP-A-14-p (24 Hour Review of Involuntary Segregation Status During PREA-Related Investigations) PRIOR to placement in any segregation for any PREA-related claim or allegation. The Warden states in his guidance that the objective of the facility is to attempt to place only those offenders in this housing who have a protective concern. The facility provided the Auditor committee forms dating back over 6 weeks to demonstrate their adoption and use and the Auditor requested that these forms be uploaded into OAS by the facility to show their compliance. Additionally, the forms are instructing staff as to any limitations on programming for those involuntarily segregated and state that these offenders will be provided privileges allowed for all offenders in this status. Existing DOC and RLCC policy, and interviews with the Warden, Deputy Warden, Assistant Warden, and PREA Compliance Manager all stated that policy and practice are that programming for such

The RLCC PREA Coordinator advises that no offenders were held in involuntary protective custody for assessment during the past 12 months and all required standards/protocols are in existing policy if it occurs. "Offenders placed in Segregation in these cases were related to either investigative or disciplinary reasons. These placements were not related to the PREA claim for protection."

offenders continues. The form allows, and the PREA Coordinator indicated, that restrictions would be specified in cases

Problems with this approach as presented are reviewed in the Standard Determination at 115.43.

**Corrective Action:** The facility corrective actions presented at 115.43 resolve issues in this Standard. The new policy provides a clear statement of intent to minimize Involuntary Segregation as well as clearly delineating expectations of managing and determining access to programs and privileges.

This area is now compliant.

where that is required.

# 115.71 Criminal and administrative agency investigations

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

The DPS&C Secretary has appointed a senior headquarters staff member to serve as DPS&C's major PREA Investigator, a position that oversees all investigations for the Department and works in conjunction with the Wardens and individual investigators. All investigation case reports are required to be concluded, reviewed, and forwarded to Headquarters within 30 days of receiving the initial allegation. In the event an extension of the 30-day time period is needed, a request is submitted to the Headquarters Director of Investigations. This HQ position also tracks SAFE/SANE evaluations and enters required data into the annual State report on investigations.

The agency refers cases of criminal sexual abuse to the Parish Sheriff's Office for investigation as necessary. On-site investigators have received training in regard to investigating sexual abuse in a confinement setting, including evidence collection and crime scene preservation. All allegations of sexual abuse/assault or sexual harassment are investigated and are referred administratively or for criminal prosecution. Staff is aware of the procedures required for an immediate first responder as well as those necessary to secure a crime scene following an allegation.

Each local law enforcement agency will work with the HQ Director of Investigations in addition to the facility investigators per the PREA coordinator and Investigator interviews, and this keeps all levels informed on a regular basis.

Incidents involving criminal acts of sexual assault and sexual misconduct where local law enforcement is not conducting the investigation should be investigated by an investigator who is acting under the authority of DPS&C's HQ-level PREA Investigator. If an investigator is not assigned to the reporting prison, one is assigned to the facility by the Chief of Operations.

Prompt attention is given to providing objective and thorough investigations pertaining to sexual abuse and/or sexual harassment that are conducted regardless of how they are reported. When sexual abuse is alleged, RLCC uses investigators who have received special training in sexual assault and sexual misconduct investigations; crime scene management; elimination of contamination; evidence collection protocol; and crisis intervention.

Investigations include the collection of and preservation of direct and circumstantial evidence as well as interviews with the victim(s), the suspected perpetrator(s), and any witnesses. Investigators also check for prior reports or complaints that may have been filed against the suspected perpetrator. Any physical and DNA evidence is collected in accordance with RLCC policy 02-01-007 – Crimes Committed on the Grounds of RLCC.

Per the investigator interview, investigators are trained to be objective and consider the facts of the allegation(s) and not weigh the individuals' status as an offender or as an employee. Offender victims are not subjected to a polygraph examination as a condition of preceding with an investigation.

Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment and these later receive Sexual Assault Incident Reviews per DOC policy. Investigative reports are compiled in accordance with DPS&C Form E (Standardized Case Report Format) which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.

Substantiated allegations of sexual abuse are referred for criminal prosecution. Investigative reports of unsubstantiated or unfounded claims are maintained in accordance with the Department Records Management Program, which requires that reports from the active year plus 6 years be archived.

In an investigation of recent sexual assault or sexual misconduct occurring within 72 hours, steps to be taken by the Warden or designee include the referral for forensic examination and detailed preservation and study of the scene.

The Warden reports he is always notified and an investigation initiated as directed. Based upon the initial inquiry and/or evidence that the allegation represents possible criminal activity, the Warden notifies local law enforcement and the facility investigative section. At the initiation of the investigation, the alleged victim(s) and alleged aggressor(s) are immediately separated if not already done. The Warden or PREA Compliance Manager coordinates with the assigned investigator in decisions regarding the housing and management of the alleged offender/victim(s), alleged offenders, and any alleged offender/witness(es) so as not to inadvertently interfere with the criminal investigation.

Investigations of sexual abuse occurring more than 72 hours after the incident is relatively similar, except that a determination is made based upon the amount of time that has passed since the alleged incident as to whether the alleged offender aggressor should be placed in a dry cell to preserve forensic evidence.

Substantiated allegations are forwarded to the local District Attorney for a decision regarding prosecution, and the PREA

Investigator works with the District Attorney's Office to ensure appropriate criminal prosecution of substantiated cases of sexual assault. Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of an investigation.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Per policy and interviews with the investigators, Warden and PCM, neither DPS&C nor RLCC impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

# Auditor Overall Determination: Meets Standard Auditor Discussion DPS&C policy is that offenders shall be notified of the outcome of investigations into allegations made by the offender that he suffered sexual abuse. Following the conclusion of an investigation into an offender's allegation that the offender suffered

DPS&C policy is that offenders shall be notified of the outcome of investigations into allegations made by the offender that he suffered sexual abuse. Following the conclusion of an investigation into an offender's allegation that the offender suffered sexual abuse, the investigator interviewed stated that he informs the offender as to whether the allegation was determined to be substantiated, unsubstantiated, or unfounded. If the prison did not conduct the investigation, it requests the relevant information from the investigative entity in order to inform the offender of the investigative findings. All 28 of the investigations of alleged sexual abuse had documented results reported back to the inmate after completion of the administrative investigations; there were no external agency investigations.

Following an offender's allegation that an employee has committed sexual abuse against him, unless it has been determined that the allegation is unfounded or unless the offender has been released from custody, the offender is informed of the following:

- The employee is no longer posted within the offender's housing unit;
- The employee is no longer employed;
- The facility learns of the employee's indictment on charges related to sexual abuse;
- The facility learns of the employee's conviction on charges related to sexual abuse.

Following an offender's allegation that an offender has committed sexual abuse against him, he is notified of the following:

- The alleged abuser has been indicted on a charge related to sexual abuse;
- The alleged abuser has been convicted on a charge related to sexual abuse.
- These notifications are documented in the case report.

The investigator indicated that all notifications use the Notification of "Outcome of PREA Allegation" form for substantiating the delivery of the notice.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	All employees are subject to disciplinary sanctions up to and including termination for violating Department Regulations regarding the "Prison Rape Elimination Act" and regarding "Sexual Harassment and Unlawful Discrimination based Upon Sex". Termination is the presumptive disciplinary sanction for an employee who engages in sexual abuse.
	The seriousness of the conduct is taken into account in determining the appropriate response according to the interview with the Warden. Regarding sexual harassment, "repeated" for the purpose of counseling sessions is more than three complaints. A third alleged sexual harassment complaint against a staff member requires a formal counseling session with the appropriate supervisor to discuss the complaint. Serious sexual harassment complaints, even if committed once, are still addressed by the Warden or leadership designee.
	Alleged inappropriate touching of a romantic nature by staff, whether wanted or unwanted, would be evaluated on a case by case basis to determine if the incident is a violation of PREA. Disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the employees' disciplinary history, and the sanctions imposed for comparable offenses.
	Substantiated cases of sexual abuse and/or sexual harassment are reported to local law enforcement regardless of whether the employee is terminated or resigns to avoid termination. Those employees with licensure are reported to the appropriate licensing boards.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Contractors and volunteers who engage in sexual abuse are prohibited from having contact with offenders and banned from the institution indefinitely. Violations of this policy by contractors and volunteers are reported to law enforcement and the respective licensing board. There were no disciplinary actions regarding volunteers or contractors this past year and it is noted that the volunteer program essentially went inactive during the COVID period.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Offenders found guilty pursuant to a formal disciplinary of engaging in offender-on-offender sexual abuse are written-up on a rule violation as enumerated in Disciplinary Rules and Procedures for Adult Offenders. All sexual contact between offenders is prohibited and violators will be charged with the appropriate rule #21 (a-e) violation. Sanctions are commensurate with the nature and circumstances of the abuse committed and includes the offender disciplinary history and comparable offenses by other offenders.
	Offenders are disciplined for violations of rules for engaging in sexual conduct with an employee. Offenders and staff are informed that there is no consenting to sexual activity in the Department of Corrections between an employee and offender.
	Mental health staff interviewed indicated that he disciplinary process takes into consideration the mental faculties of the offender who perpetrated the act when determining the sanctions. In these cases, a referral to mental health is made and the report deferred until the completion of the mental health evaluation. Reports of sexual abuse and/or sexual harassment made in good faith and based on reasonable belief that the alleged conduct occurred is not false reporting or considered lying. Decisions are based on the preponderance of evidence.

# 115.81 Medical and mental health screenings; history of sexual abuse Auditor Overall Determination: Meets Standard **Auditor Discussion** If the PREA screening indicates that an offender has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, or that an offender perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, mental health staff interviewed state they ensure that the offender is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. The Classification Department completes an Availability of Mental Health Counseling Form upon intake for those offenders with a history of sexual victimization or who have previously perpetrated sexual abuse and this form is forwarded to the Mental Health Director for completion and placement into the Mental Health Section of the Medical Record. Any information related to sexual victimization or abusiveness that occurred in an institutional setting is limited to treatment staff (and others only as necessary) in order to develop 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. Medical and mental health practitioners stated they obtain informed consent from offenders before reporting information regarding prior sexual victimization that did not occur in an institutional setting, unless the offender is under the age of 18.

All offenders interviewed were aware of services available such as mental health contacts and counseling and had received information in multiple formats concerning the facility PREA program. All offenders who reported any prior abuse or allegation of abuse had been evaluated by Mental Health staff. Offenders also verified that Mental Health staff asked the PREA Intake

questions and arranged referrals to Mental health when indicated at the Intake interview.

# 115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

The policy is that offenders receive timely, unimpeded access to emergency medical treatment and crisis intervention services in accordance with the professional judgment rendered by medical and mental health practitioners. The medical staff supervisor, mental health staff, PREA Coordinator, and SANE staff interviewed all support this accurately reflects actual operations. It also appears evident at RLCC, especially in view of the significant number of aging offenders.

All PREA incident cards (carried by every staff member) list the preliminary steps to protect the offender victim and include the immediate notification of supervisors and medical and mental health staff.

Victims of sexual abuse or sexual harassment are evaluated and treated and also receive follow-up services that include medical and mental health treatment plans and referrals upon discharge. Medical and Mental Health staff interviewed all stated that treatment plans and Emergency Room recommendations received following hospital visits are included in facility plans.

RLCC offers all victims of sexual abuse forensic medical examinations at an outside facility when evidentiary or medically appropriate, without financial cost to the victim. If required, emergencies are sent to nearby Avoyelles Hospital. More specialized medical facilities are available in Alexandria, LA., somewhat further away, for treatment. RLCC Medical staff have had some training in regard to the SAFE/SANE process and the use of a rape kit, but the RLCC procedure is to send the offender to the outside medical center. Such examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. If SAFEs or SANEs cannot be made available, the examination is performed by other qualified medical practitioners, however, the hospital has 24/7 SANE coverage arranged. RLCC documents efforts it has made to provide SAFEs and SANEs and these personnel are, in fact, normally available at the hospital used in Avoyelles.

Testing for sexually transmitted diseases and other diseases as determined by the attending physician and counseling are made available to the alleged victim when appropriate.

Referral to MH always occurs and after-incident support is offered to the offender.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Community-level of care is the RLCC target performance level for medical and mental health services rendered to victims.  Random and specialized staff interviewed all felt that this is achieved and likely surpassed when considering many other underserved areas of the state.
	Offenders who have been victimized by sexual abuse in any prison, jail, lock-up or juvenile facility are offered medical and mental health evaluations and, as appropriate, treatment. Follow-up services and treatment plans, as well as referrals for continuing care following transfer or placement in other facilities, are provided for victims. Interviews indicated care and counseling often continue for numerous months but can also continue throughout the incarceration.
	Mental health evaluations are conducted on all-known offender-on-offender abusers within 60 days of learning of the abuse.  RLCC offers a sex offender program to such offenders when appropriate.
	Victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. These services are at no cost to the victim regardless of whether the victim names the abuser or cooperates with any investigation.

# 115.86 Sexual abuse incident reviews Auditor Overall Determination: Meets Standard **Auditor Discussion** The prison conducts a Sexual Abuse Incident Review within 30 days of the conclusion of every sexual abuse investigation unless the allegation is determined to be unfounded. The review team includes upper management officials, (Deputy Warden, or Assistant Wardens, and PREA Compliance Manager, etc.) with input from line supervisors, investigators and medical or mental health practitioners. The review team prepares a Sexual Abuse Incident Review Form that follows the elements of the Standard. The completed form is maintained in the investigative file and a copy is sent to the Warden and the PREA Compliance Manager. The review team members interviewed all agreed that the review considers the following: A need to change policy or practice to better prevent, detect, or respond to sexual abuse; • Was the abuse motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification status or the perceived status; • An examination of the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; · Adequacy of staffing levels in the area; · Considers whether monitoring technology should be deployed are augmented; • A report of the findings is submitted to the Warden. Recommendations for improvement that are in the Warden's control are considered and normally implemented. Documentation is provided if a recommendation from the Incident Review team is not implemented. There were 16 administrative investigations of alleged sexual abuse in the last 12 months and all were followed by an

incident review within 30 days.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The LA DPS&C monitoring instrument is used to collect and track uniform data of sexual abuse at facilities. This incident-based data instrument includes all the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice's Bureau of Justice Statistics. An aggregated assessment is made of the data annually and included in a complied report by the PREA Coordinator for placement on the DOC website, and the PREA Coordinator and PCM interviews state that this is the procedure that is followed.
	DPS&C Procedures for Reporting to the United States Department of Justice:
	· DPS&C's PREA Investigator prepares the annual Survey of Sexual Victimization (SSV Report) for State Prison Systems report, containing required statistics for DPS&C owned and operated facilities.
	· A separate Incident Form is prepared for each substantiated sexual victimization allegation reported at a Department facility and is created by the PREA Investigator at the facility where the incident occurred.
	· These forms are submitted by the PREA Investigator to the United States Department of Justice by September 1st of each year for the statistics accumulated the prior calendar year.
	· A second report is completed by DPS&C's PREA Investigator which includes all privately-operated facilities and transitional work programs under contract to or under cooperative endeavor agreement with the DPS&C.
	·The Department's PREA Investigator maintains any reports concerning a substantiated sexual victimization allegation occurring at all state privately operated prisons and all transitional work programs under contract or cooperative agreement with the DPS&C.
	· The Department's PREA Investigator submits copies of both SSV reports to the Secretary and the Chief of Operations prior to September 1st of each year.
	· The aggregate numbers of the SSV reports' statistics from the state facilities, privately operated prison facilities and transitional work programs are posted on DPS&C's website by October 1st of each year.
	·The Department maintains sexual abuse data collected pursuant to La. R.S. 115.87 for at least 10 years after the date of

initial collection.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Reviews of all data collected are used to assess and improve the effectiveness of sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas in DPS&C. RLCC's annual report contains statistics for the fiscal reporting year and can be compared to the previous year data.
	Investigations (both criminal and administrative) review all details, including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are reviewed at each successive level per DOC policy. Investigative reports are compiled in accordance with DPS&C's Standardized Case Report Format, which includes descriptions of physical and testimonial evidence as well as the reasoning behind credibility assessments and findings.
	The Warden and PCM stated that the Warden approves the Annual Reports and submits them to the parent agency (DPS&C). Reviews of this data is accomplished at each level for analysis, determining trends or needs, etc.
	For annual reporting purposes redaction is not needed as it (the report) only contains statistical data and does not make reference to any individual(s).

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
DPS&C's PREA Coordinator makes an annual report regarding all sexual abuse data from DPS&C facilities public through DPS&C's website <a href="https://www.doc.la.gov">www.doc.la.gov</a> . The report consists of data only and does not include persor specific institutions. RLCC provides its data to the PREA Coordinator. All reports are available through pull request via the la.gov website.	
	All data is securely preserved and retained in accordance with the procedures outlined in 115.87. In accordance with Department Regulations regarding the Records Management Program, Investigative Reports are retained as Active plus six years.
	Investigations (both criminal and administrative) review all details including what staff actions or inactions may have led to the sexual abuse and/or sexual harassment, and these are later reviewed for potential changes to policy or operations. Investigative reports are compiled in accordance with DPS&C Standardized Case Report Format, which includes descriptions of the physical evidence and testimonial evidence as well as the reasoning behind credibility assessments and facts and findings.
	Cases sent for criminal prosecution are maintained as long as the alleged abuser is incarcerated or the employee is still employed, plus five years. The release of the accused abuser (offender or staff) does not constitute grounds for termination of the investigation.
	The PREA Coordinator and investigator report that unsubstantiated or unfounded claims are maintained in accordance with

the Department Records Management Program, which requires the active year plus 6 years to be archived.

115.401	Frequency and scope of audits			
	Auditor Overall Determination: Meets Standard			
	Auditor Discussion			
	The Warden, PREA Compliance Manager as well as the Agency PREA Coordinator and staff were very supportive and made efforts ensured full access and ease of audit operation for the auditors, both before and after the site visit and during the time at the prison. All areas were accessible and all information required or requested was provided. The Agency continues its 3-year auditing cycle on track although some schedules had to be adjusted due to COVID closures and delays.			

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The LA DPS&C PREA Coordinator publishes all required reporting data and makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through DPS&C's website <a href="www.doc.la.gov">www.doc.la.gov</a>

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?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
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.)	yes
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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
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)?	na

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.)	yes
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.)	na
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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.)	па
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

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
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
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
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
	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?  Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Does the agency document all such referrals?  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).)  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?  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?  Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment  Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retatiation for reporting sexual abuse and sexual harassment?  Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment victims?  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?  Does the agency train all employees who may have contact with inmates on how to communicate effectively and profes

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.)	yes
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.)	na
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 degree, 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 degree, 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 degree, 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.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
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
		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.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

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

115.53 (a)	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.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	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 (I)	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.)	yes
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.)	na	
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.)	yes	
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.)	no	
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes	
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na	
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	