

PREA Facility Audit Report: Final

Name of Facility: Elayn Hunt Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: 03/17/2023

Date Final Report Submitted: 08/09/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: William Peck	Date of Signature: 08/09/ 2023

AUDITOR INFORMATION	
Auditor name:	Peck, William
Email:	williamepeck@gmail.com
Start Date of On-Site Audit:	02/13/2023
End Date of On-Site Audit:	02/15/2023

FACILITY INFORMATION	
Facility name:	Elayn Hunt Correctional Center
Facility physical address:	6925 Louisiana 74, Saint Gabriel, Louisiana - 70776
Facility mailing address:	6925 HWY 74, Saint Gabriel, Louisiana - 70776

Primary Contact	
Name:	Shelia Robinson
Email Address:	shelia.robinson@la.gov
Telephone Number:	225-405-2455

Warden/Jail Administrator/Sheriff/Director	
Name:	Warden Donnie Boredelon
Email Address:	Donnie.Bordelon@la.gov
Telephone Number:	225-642-3306

Facility PREA Compliance Manager	
Name:	Shelia Robinson
Email Address:	shelia.robinson@la.gov
Telephone Number:	
Name:	Stephanie Michel
Email Address:	stephanie.michel@la.gov
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	John Prejean
Email Address:	john.prejean@la.gov
Telephone Number:	504-495-9015

Facility Characteristics	
Designed facility capacity:	1975
Current population of facility:	1740

Average daily population for the past 12 months:	1667
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:	19-65
Facility security levels/inmate custody levels:	minimum, medium maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	481
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	7
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	535

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

Summary of Audit Findings

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

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

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-02-13
2. End date of the onsite portion of the audit:	2023-02-15

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1975
15. Average daily population for the past 12 months:	1667
16. Number of inmate/resident/detainee housing units:	18
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1649
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	181
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	79
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>7</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>33</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>49</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>481</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>535</p>

51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	<p>7</p>
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	<p>No text provided.</p>
<h2>INTERVIEWS</h2>	
<h3>Inmate/Resident/Detainee Interviews</h3>	
<h4>Random Inmate/Resident/Detainee Interviews</h4>	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	<p>27</p>
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>Random selection distributed among housing units</p>
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<ul style="list-style-type: none"> <input checked="" type="radio"/> Yes <input type="radio"/> No

57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	27
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	7
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	4
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1

63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	2
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	3
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	3
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3

<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>7</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>

Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	1
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

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

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

Yes

No

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

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>No text provided.</p>
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Documentation Sampling

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

<p>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>Auditor reviewed random intake files for completed forms, 6 investigation records, 5 HR files on both newly hired and experienced staff, and 4 inmate files to verify time frames and reception of PREA education and assessment.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	11	0	11	0
Staff-on-inmate sexual abuse	9	2	11	2
Total	20	2	22	2

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	0	6	0
Staff-on-inmate sexual harassment	3	0	3	0
Total	9	0	9	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	3	0	0	0
Total	0	3	0	0	0

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	4	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	4	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	6
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<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>Facility reported no sexual harassment cases, only 3 criminal cases</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

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

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

- Yes
- No

Non-certified Support Staff

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

- Yes
- No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

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

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • 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	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The Department has a zero-tolerance policy toward victimization and sexual abuse within the facilities through the PREA Program.</p> <p>“It is the policy of EHCC 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. Leadership has zero- tolerance for incidents of sexual abuse and sexual harassment.” Staff who violate this regulation may receive disciplinary action, up to and including termination.</p> <p>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 reported in her interview that she has adequate time for this function, in addition to performing Deputy Warden duties at her own facility. Her interview indicates that the agency has a system of routine</p>

	<p>telephone conferences, site visits on a regular basis, and that there are routine mock audits and video conferences of both State DOC facilities and local level (Parish) facilities that house DOC offenders, per their DOC contracts. The PREA Compliance Manager (PCM) reported in the interview that she has sufficient time and authority to coordinate the facility's efforts to comply with PREA Standards.</p> <p>Organizational charts were provided which indicated the Agency PREA Coordinator reports directly to the DOC Chief of Operations; and the EHCC PREA Assistant Warden for Healthcare, who is also the Compliance Manager, reports directly to the Deputy Warden of Treatment at EHCC. The Warden's interview confirmed that each has the authority to oversee facility compliance to PREA.</p> <p>The PREA Compliance Manager (PCM) serves as a liaison with DPS&C's PREA Coordinator and other appropriate Headquarters staff and is responsible for monitoring PREA related activities. The PCM ensures that each requirement of Department Regulation OP-A-15, on Prison Rape Elimination Act (PREA), including verification that all training, screening, assessments, reporting, and monitoring is accomplished in a timely manner and that full investigations, appropriate reporting, and compliance with the standards program are treated as a top priority by administrators and investigators.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency is public and contracts for the confinement of its offenders with private agencies or other entities including other local government agencies. The agreements include the contractor's obligation to comply with the PREA standards and required annual reviews of PREA compliance.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Since the last PREA audit, the average daily number of offenders was 1667. The average daily number of offenders on which the staffing plan was predicated has used the above 1667.</p> <p>The DOC PREA Coordinator affirmed that they do contract out confinement to outside</p>

facilities and all PREA requirements are included in every DOC contract. Further, she noted that all contractors are routinely audited by the State agency and the audit includes PREA requirement compliance. EHCC does contract for services and some personnel and every facility contract is specific on meeting PREA requirements and training according to interviews with the PCM, Human Resources officer, and Warden.

Department Regulation OP-A-15 addresses the components of this standard and requires a staffing plan to be developed to provide adequate staffing levels to protect offenders against sexual abuse, as well as an annual review of the staffing plan which includes the consultation of the DOC PREA Coordinator. When calculating adequate long-term staffing levels and determining the need for video monitoring, the agency requires the facility to take into consideration the eleven items listed in §115.13(a):

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any finding of inadequacy from Federal investigative agencies;
- Any findings of inadequacy from internal or external oversight bodies;
- All components of the unit's physical plant (including "blind spots" or areas where staff or offenders may be isolated);
- The composition of the offender population;
- The number and placement of supervisory staff;
- Institution programs occurring on a particular shift;
- Any applicable State or local laws, regulations or standards;
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- Any other relevant factors.

There have been significant numbers of vacancies that presented ongoing challenges (hovering around 120-150) but recent hiring initiatives are reducing that noticeably and is anticipated that they will reduce vacancies to below 100. The facility staff level is also occasionally challenged by Emergency trips and Hurricane preparations and responses.

In circumstances where the staffing plan is not complied with, the Warden or designee has to document and justify all deviations from the plan. This document is forwarded to the Agency PREA Coordinator Compliance Manager for retention purposes. UORs (Unusual Occurrence Reports) are filed if there is a staffing shortfall that cannot be remedied with overtime and backup plans. The facility has added 79 additional video cameras since the last audit 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

	<p>housing and/or activity area are well supervised.</p> <p>In addition to and along with other rounds, the Warden requires higher-level Supervisors to 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 an announcement is related to legitimate operational functions.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	N/A, Youthful offenders are not housed at this facility.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In the past 12 months, there were no cross-gender strip or cross-gender visual body cavity searches of inmates and no cross-gender visual body cavity searches of offenders that did not involve exigent circumstances or were performed by non-medical staff.</p> <p>All security staff (100%) have received training on conducting cross-gender pat-down searches and searches of transgender and intersex offenders in a professional and respectful manner, consistent with security needs. Department Regulation OP-A-15 addresses the components of this standard and requires a staffing plan to be developed to provide adequate staffing levels to protect offenders against sexual abuse, as well as an annual PREA review of the staffing plan which includes the consultation of the DOC PREA Coordinator. When calculating adequate long-term staffing levels and determining the need for video monitoring, the agency requires the facility to take into consideration the eleven items listed in §115.13(a):</p> <ul style="list-style-type: none"> · Generally accepted detention and correctional practices; · Any judicial findings of inadequacy; · Any finding of inadequacy from Federal investigative agencies; · Any findings of inadequacy from internal or external oversight bodies; · All components of the unit’s physical plant (including “blind spots” or areas

	<p>where staff or offenders may be isolated);</p> <ul style="list-style-type: none"> · The composition of the offender population; · The number and placement of supervisory staff; · Institution programs occurring on a particular shift; · Any applicable State or local laws, regulations or standards; · The prevalence of substantiated and unsubstantiated incidents of sexual abuse; · Any other relevant factors. <p>There are significant numbers of vacancies that present ongoing challenges, although decreasing noticeably, and the facility is also occasionally challenged by Emergency trips and Hurricane preparations and responses. In circumstances where the staffing plan is not complied with, the Warden or designee has to document and justify all deviations from the plan. This document is forwarded to the Agency PREA Coordinator Compliance Manager for retention purposes. UORs (Unusual Occurrence Reports) are filed if there is a staffing shortfall that cannot be remedied with overtime and backup plans. The facility has added additional video cameras since the last audit 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. There are 364 cameras now (327 cameras inside the facility, 37 on the Perimeter) and there were 256 at the 2019 audit.</p> <p>Interviews with the Warden, Deputy Warden, and PCM indicated that the camera placement follows a strategy of increasing sexual safety through the continuing elimination of blind spots.</p> <p>In addition to and along with other rounds, the Warden requires higher-level Supervisors to 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 an announcement is related to legitimate operational functions.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	In the past 12 months, the facility PAQ stated that there were no instances where offender interpreters, readers, or other types of offenders assistants have been used

and it was not the case that an extended delay in obtaining another interpreter could compromise the offender's safety, the performance of first-response duties under §115.64, or the investigation of the offender's allegations.

However, interviews with several offenders and staff made it clear that offender interpreters are frequently used whenever interpretation is necessary and they consider this use to be routine. According to some interviews, this included interpretation provided with medical and legal issues, a clear problem. The interviews did indicate that the offenders themselves often approached staff with another offender to do the interpretation but this is still unsatisfactory..

The LA DOC has a contract with LinguaLinx but staff interviewed appeared unfamiliar with this option, and no LEP offenders reported using it or knowing about it. The preference for use of offender interpreters may be related to cost avoidance, perhaps to supervisor choices, or it may be related to lack of training on availability and process to use LinguaLinx. The facility needs to determine and rectify the shortfall areas, with special attention to issues in using offenders in medical/intake/reporting/ investigative issues.

An April 23 email from the PCM/Assistant Warden informed the Auditor of steps taken to address this issue:

1. - Offenders were given instruction on using LinguaLinx
2. - Staff has been retrained on assisting offenders in accessing LinguaLinx
3. - Posters with access info are now placed on all bulletin boards in all units as well as on all staff bulletin boards

These actions satisfy most of the issue, however the Auditor requested a copy of the posters; a copy of the staff training lesson plan; and a copy of the specific policy on using offender interpreters only in exigent cases as opposed to routinely. These were provided July 24, 2023 in OAS.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

In the past 12 months, 220 persons hired who may have contact with offenders, and all have had criminal background record checks.

Agency policy prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with offenders who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual

activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

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

Department Regulation OP-A-15 outlines DOC requirements for hiring and promoting staff and requires all prospective employees receive a background check every five years.

EHCC reported that the five-year criminal background checks were conducted in 2018 and this was verified in the random staff HR files checked. Agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with offenders. This has also been done for volunteers, according to interviews with the PCM. Both random staff interviews and the contractor interviewed indicated these checks had been done and they were aware of them when they occurred. A review of 6 staff personnel files, to check for training, paperwork required, and completion of a criminal records check, was done and supported the interviews.

Prior to hiring, detailing or promoting any employee/applicant or enlisting services of a contractor who may have contact with offenders EHCC conducts criminal background checks in accordance with Department Regulation OP-A-15. Seven contractor checks were done in the past year.

As indicated by interviews with the PREA Compliance Manager and the Human Resources (HR) staff member, EHCC 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 DOC 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

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

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 a special duty job, or direct promotion must also answer

	<p>these questions prior to the effective date of hire or promotion.</p> <p>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.</p> <p>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.</p> <p>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.</p> <p>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.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The agency/facility has not acquired a new facility or made a substantial modification to existing facilities since the last PREA audit but they have added 71 new cameras that target identified blind spots or potential areas for PREA issues. The agency has updated the video monitoring system and did consider how it would enhance the agency’s ability to protect offenders from sexual abuse.</p> <p>There are currently 364 cameras as opposed to 256 at the last audit, and 327 of these cameras are inside the facility, the other 37 are perimeter security cameras. Although a total video monitoring system has not actually been installed in the past 12 months, the electronic monitoring camera system has continued to expand since the last audit. All configurations were reflective of a strong focus on preventing blind spots and increasing sexual safety, according to interviews with the Warden, the Investigator, and the PREA Compliance Manager (PCM).</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Three forensic medical exams conducted during the past 12 months, all by SANEs/SAFEs, at Our Lady of the Lake Hospital in Baton Rouge.</p> <p>The agency/facility is responsible for conducting administrative or criminal sexual abuse investigations (including offender-on-offender sexual abuse or staff sexual misconduct). As a matter of facility investigative protocol, EHCC initiates every allegation as a potential criminal case. Investigations begin as administrative and the local law enforcement department is used for all criminal investigations. The Iberville Parish Sheriff's Office maintains responsibility for conducting criminal sexual abuse investigations and, in fact, is brought in if the facility determines the allegation does appear criminal in nature. The Parish Sheriff has resources available as needed in the event a case is criminal in nature. There were 3 forensic medical exams conducted during the past 12 months, all by local hospital SAFE/SANE staff.</p> <p>Interviews with the PCM, PREA Coordinator and the Manager of PREA services at the Victim Advocacy Agency all indicate that Victim Advocacy services are performed by Mental Health staff inside the facility and that the responsibility for those services transitions to the local STAR (Sexual Trauma Awareness and Response) Agency if the offender is sent to an outside medical facility. The facility Advocates resume their services upon the return of the offender from the hospital. All advocates at the facility have completed training provided by the outside advocacy agencies and their PREA staffs,</p>

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In the past 12 months, 36 allegations of sexual abuse and sexual harassment that were received resulting in administrative investigations. Two of the 36 were referred for criminal investigation. Agency policy requires that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. The facility has an agreement with the Iberville Sheriff's Office for the Sheriff's investigators to observe PREA Standards and protocols.</p>

115.31	Employee training
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Auditor Overall Determination: Meets Standard

Auditor Discussion

There are 481 staff who may have contact with offenders, and 366 of those staff who were trained or retrained on the PREA requirements this past year. Additionally, there were 185 new staff brought on board after Training Academy completion. There is additional routine roll call training and information regarding sexual abuse and harassment as well as annual refresher training for all staff- line, management, and specialized staff.

Security and non-security staff both go through the annual required in-service refresher training, normally in February. An institution-wide make-up training program is conducted in October and November until every staff member has been trained.

The agency trains all employees who may have contact with offenders on the agency's policies in the PREA areas, including: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; on the right of offenders and employees to be free from retaliation for reporting sexual abuse and sexual harassment; and on the right of offenders to be free from sexual abuse and sexual harassment, among others. The agency trains all employees who may have contact with offenders on the dynamics of sexual abuse and sexual harassment in confinement. All required training is part of the education program.

Medical, Mental Health, and Investigative staff all received specific job-related specialty training and Mental Health staff also received specific training to be Victim Advocates.

One training deficiency involves searches of offenders. Several staff interviewed made statements that appeared overly sensitive about violating offenders' "privacy" during pat searches and indicated that they were not always as thorough as they had been trained to be; one indicated that they would never even search the crotch area at all, that they stopped the pat search at knee level. This requires attention and training to remediate this shortfall and ensure proper staff execution of good security practice.

In an April 23 email, the Assistant Warden/PCM advised the Auditor that The Training Academy has added additional classes on shakedowns and searches for both new hires and annual refresher training; that supervisors had provided additional roll call training on proper searches; and that supervisors had been directed to ensure staff were searching properly and correct any deficiencies among their unit staff.

The Auditor has requested a copy of training documents and lesson plans used. These were provided July 24, 2023 in OAS.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Some 559 volunteers and contractors, who may have contact with offenders, were reported trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The facility averages 1968 volunteers and contractors entering the facility annually.</p> <p>All volunteers and contractors who have offender contact were trained in the required PREA procedures and policies and training. Most activities at EHCC are conducted by DOC State employees and there are few contractors used (seven were reported for the last 12 months).</p> <p>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 is also responsible for ensuring that all who have contact with offenders receive training on their responsibilities.</p> <p>Interviews with random staff and the PCM indicated that contractors and volunteers are informed, prior to the awarding of any contract or facility access approval, of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Contractors and volunteers are required by Department Regulation No. OP-A-15 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.</p> <p>Interviews with trained personnel and the PCM confirmed volunteers are provided the training required by this standard. 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 trained on the zero-tolerance policy regarding sexual abuse and sexual harassment and informed of the procedures to follow to report such incidents.</p> <p>Almost all volunteers at EHCC are religious, some who visit EHCC on a monthly basis, and others who come only on special religious holidays or occasions. The program is building back from damage that occurred during COVID program losses. The deputy warden of programs and the chaplain must approve all volunteers; and they must complete both volunteer and PREA training and undergo background records checks prior to being approved, with subsequent records checks every 2 years.</p>

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115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The number of offenders admitted during past 12 months who were given this educational information at intake was 1456. It is noted that this facility has a reception mission and classifies offenders for facilities throughout the state, so this initial education is an ongoing requirement for large numbers of offenders. Additionally, the facility is designated to receive identified medical and mental health offenders and so the education program routinely incorporates methods to inform disabled and LEP offenders.</p> <p>Department of Corrections Regulation OP-A-15 supports the components of this standard. All offenders are provided offender PREA orientation in the form of a handbook, video, and verbal instruction upon intake, including detailed PREA information regarding zero tolerance, sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment, as well as the right to be free from retaliation for reporting incidents,</p> <p>All offenders sign an acknowledgment (DOC Form B-02-16-D) verifying that intake assessment included the Offender Handbook, the briefing information on PREA, and the viewing of the PREA video. It was verified through interviews with offenders that the population is knowledgeable about PREA. EHCC has appropriate signage/posters throughout the facility that include the Crime Stoppers toll-free number for offenders to anonymously report allegations of sexual abuse. PREA brochures/posters were available in English and Spanish.</p> <p>Each time an offender transfers, this information is required to be repeated at the new institution and the offender signs a new Intake Sheet; This process 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:</p> <ul style="list-style-type: none"> • 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 <p>The facility utilizes different formats to ensure offenders understand the information that is being presented, including;</p>

- Offenders who are limited English proficient;
- Offenders who are deaf;
- Offenders with visual impairment; and
- 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 are very familiar with the facility's PREA program as well as the hotline number. Most reported that they had been told to report to staff if there were any PREA issues or concerns but they did recall other methods of reporting when specifically questioned. 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 verified receiving extra attention to make certain they understood PREA information.

EHCC PAQ reports that it does not rely on offender interpreters or offender readers in the Reception and Diagnostic or intake processes but interviews with offenders disagree. The DOC reports it utilizes a Lingulinx Telephone Interpreting Services contract for all foreign language interpreting needs beyond staff or local interpreter capabilities, however no interviews reported any use of this resource. Several offender interviews indicated having observed offender interpreters also used in medical processes.

An April 23 email from the PCM/Assistant Warden informed the Auditor of steps taken to address this issue:

- Offenders were given instruction on using LinguaLinx
- Staff has been retrained on assisting offenders in accessing LinguaLinx
- Posters with access info are now placed on all bulletin boards in all units as well as on all staff bulletin boards

These actions satisfy most of the issue, however the Auditor requested a copy of the posters; a copy of the lesson plan; and a copy of the specific policy on using offender interpreters only in exigent cases as opposed to routinely. These were provided July 24, 2023.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	There are 3 investigators currently employed who have completed the required

	<p>training by the State, by ACA (American Correctional Association) training, and by the NIC (National Institute of Corrections) training, both basic and advanced investigations classes.</p> <p>DOJ National Institute of Corrections training has now been completed by all investigators and interviews with the facility investigator report that all required areas are trained.</p> <p>Interview with the DOC PREA Coordinator indicated that the DOC Chief Investigator regularly provides an extensive training program for investigators that benefits every DOC investigator.</p> <p>Investigators receive training in conducting sexual abuse and sexual harassment investigations in a confinement facility. The agency maintains documentation showing that investigators have completed the required training. Investigator interview confirmed that this training includes:</p> <ul style="list-style-type: none"> • Techniques for interviewing sexual abuse victims; • Proper use of Miranda and Garrity warnings; • Sexual abuse data collection; and • Criteria and evidence required to substantiate a case for administrative action or prosecution
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115.35	Specialized training: Medical and mental health care
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>There are 68 medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy, including staff correctional training, professional training, and the correctional Medical/Mental Health training available through the National Institute of Corrections.</p> <p>The agency has a DOC policy related to the training of medical and mental health practitioners who work regularly in its facilities. All medical and mental health care practitioners who work regularly at this facility have received the training required by agency policy, 100%.</p> <p>EHCC reports that all staff has received specialized training as required in 115.35 (a) and staff interviews and random file reviews supported that this has occurred. The training includes:</p>

- 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 professional 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. Security and non-Security go through the annual in-service training together.

The staff interviewed indicated training was very useful to them but also indicated their time constraints were very real due to being somewhat short-staffed in their positions. They felt that offenders here are safe and receive few indications of offenders fearful or concerned about sexual safety.

The facility maintains file documentation that medical and mental health practitioners have received the required DOC training referenced in this standard, either from the agency or elsewhere, and professional training files are maintained in the medical and mental health departments.

Mental Health staff have also completed specific training required to perform as facility Victim Advocates.

115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>There were 1456 offenders entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other offenders within 72 hours of their entry into the facility. This facility does not receive a short-term population, so those 1456 all remained at the facility in excess of 30 days and received full education at the time of intake and orientation.</p> <p>Since these offenders remained in the facility for 30 days or more, they were also reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival, based upon any additional, relevant information received</p>

since intake. Offenders are not transferred until at least the end of the reception process, usually about 6 weeks, so confinement at EHCC beyond 30 days is routine.

The reassessment of these offenders is done individually with both a classification staff member and a Mental Health staff member, each doing a separate reassessment on each offender, and both occurring between 14-30 days of arrival. Annual reviews are completed by a joint multi-disciplinary team with wide facility representation in the membership, and all data from arrival is reviewed, all PREA questions are re-asked, and a professional staff check-in is done on any changes, perception of safety, etc.

Staff interviewed about this area, both random and specialized, and including intake and mental health staff, noted that EHCC was continuing recent years' trends of doing increasingly detailed intake processes due to PREA requirements and increasing medical, and mental health needs, and was well experienced in this process. The intake process includes staff from Medical, Dental, Security and Mental Health meeting with each new arrival to determine if there are any situations that need to be addressed.

Interviews also noted that information is restricted to management staff and professional staff directly involved with an offender. Access to electronic and paper records both are restricted to a need-to-know basis and identified staff.

It is also recognized that the increased numbers of older offenders with fairly serious medical needs have placed numerous challenges on the EHCC medical department and there has been a responsive increase in facility PREA assessment and reassessment efforts to ensure the safety of this sometimes more vulnerable population.

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

In addition, the screening also includes:

- Prior acts of sexual abuse;
- Prior convictions for violent offenses;

- When known, to the facility: a history of prior institutional violence or sexual abuse

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, and this can be done earlier based upon additional, relevant information received by the facility since the intake screening. An offender(s) risk is always reassessed when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on the offender's risk of sexual victimization or abusiveness.

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

All offenders are screened to assess their risk of being sexually abused or abusive toward other offenders no later than 72 hours after arrival at the facility. EHCC uses the PREA Screening Checklist, a DOC tool to assess an offender's probability of being a Victim, a Sexual Predator, a not high-risk offender. Reception center staff enter the results of the Checklist in the Offender Management System. Consideration concerning housing, including possible single-cell placement, is determined by the Classification process based on this initial screening information.

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

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

Decisions concerning housing assignments, jobs, and group activities for PREA Blue HRSV and PREA Red HRSP offenders are the responsibility of the Intake Team Classification groups and are based on the Checklist, record review, prior facility behavior and current behavior. If mental health intervention is indicated, a referral is made by the Board to a mental health professional.

Transgender or intersex offenders are assessed on a case-by-case basis as to whether

any potential placement would endanger the offender’s health and safety or present management or security problems. Policy for transgender offenders provides that they can shower separately, and each unit documents a Shower Preference Statement. Medical questions regarding transgender or intersex status are referred to DOC’s Gender Dysphoria Disorder Clinical Management Team (GDCMT).

DOC policy requires transgender and intersex offenders to be 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, with the views of the offender about their own safety being given consideration. In the EHCC process, these offenders are reviewed at least twice a year and also participate in monthly meetings that enable mental health staff to check in on the offenders and ensure there are no problems being encountered.

Transgender offenders are given an opportunity to shower separately from other offenders by completing a Shower Preference Statement.

The 2019 audit onsite review reflected a lack of adequate privacy and space separation during intake interviews that would provide privacy during offender questioning, including PREA intake questions. This process was reconfigured so that the questions are now asked in individual cubicles rather than in open spaces; and the site review of intake areas reflected this correction and improvement.

All 1456 offenders entering the facility (either through intake or transfer) within the past 12 months, whose length of stay in the facility was for 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Department Regulation OP-A-15 includes language regarding the utilization and implementation of the DPS&C PREA Vulnerability Assessment. Victims and predators cannot live in the same dormitories but can be assigned to the same job or programming if the supervisor of the area is aware of the issue, always present, and closely monitors the work group. The directive required that all personnel involved in conducting Boards or in the movement of offenders receive training regarding the importance of using the PREA high-risk assessment.</p> <p>A few staff interviews reported that classification decisions can place both categories in dormitories together if deemed appropriate. The facility states that these two groups are not placed in the same dormitory and that a list of all HRSP and HRSV</p>

offenders are provided all unit and housing managers to ensure these offenders are maintained in separate areas.

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 Office 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 to separate those offenders at high risk of being sexually victimized from those at high risk of being sexually abusive. Assignment to a specific unit is made after consideration of age, PREA status, disciplinary history, gang affiliation, medical and mental health concerns, pending charges and prior incarceration history. Items include:

- Institution assignment recommendations;
- Housing assignments;
- Bed assignments;
- Work assignments;
- Education assignments; and
- Program

Offenders in LA DOC generally are transferred from the reception prison to other DOC facilities based on sentence and not by the type of crime, etc. It then becomes the receiving facility's responsibility to separate and secure the individual offender in the safest location and program. The exception is that an offender who receives a death penalty sentence is transported directly to the Louisiana State Penitentiary, not to the reception facility. Once at EHCC, the facility does not assign lesbian, gay, or bisexual offenders their housing on the basis of their identification. The Auditor found them located across the entire housing spectrum and throughout the population's job assignment options.

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 also tasked to ensure that they have access to the services of a professional who has training and 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 these offenders if it would be appropriate.

The Classification Officer ensures that PREA information is entered into the offender's Master Record and in the mental health section of the offender's medical record for monitoring purposes. The facility staff reviews the offender's PREA designation prior to any housing, job or program reassignment in order to make an individualized safety determination. The Classification Board conducts subsequent reviews depending on the offender's classification and reevaluates every offender at least annually.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 338 1474 584">There has been zero use of protective custody separation in the last 12 months and there were no cases of offenders at risk of sexual victimization held in involuntary segregated housing in the past 12 months. If an involuntary segregated housing assignment is made, the facility affords each such offender a review every 30 days to determine whether there is a continuing need for separation from the general population.</p> <p data-bbox="256 622 1474 1032">Department Regulation OP-A-15 prohibits offenders at high risk for sexual victimization from being placed in segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. EHCC initiated significant changes in segregation procedures following the 2016 PREA audit and developed a separate program that places protective custody offenders under mental health management and programming, and not under security-focused segregation. Aggressors are segregated but victims are not, although they can request protective custody and, if they do, it is reviewed by a PC management team to determine the safest management of the offender.</p> <p data-bbox="256 1070 1437 1272">Generally, an offender who was held in protective custody would remain there only until the investigation is completed and a determination made regarding the allegation. DPS&C has a management form titled “24-hour Review of Involuntary Segregation Status During PREA- Related Investigation” that EHCC would utilize to document the offender’s stay in restricted housing.</p> <p data-bbox="256 1310 1453 1512">An offender placed in segregation because of a high risk of sexual victimization is required to have access to programs, privileges, education and work opportunities commensurate to offenders in the general population. Documentation is maintained indicating which opportunities were limited, the duration of the limitations and the reasons for the limitations.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 1863 544 1897">Auditor Discussion</p> <p data-bbox="256 1937 1469 2063">Proper policy and protocols are in place, however offenders and staff both were largely unable to identify multiple methods of reporting. Most staff and offenders interviewed were almost entirely focused on reporting any allegation to staff, as they</p>

reported this was the main procedure they had been taught. A very few offenders mentioned either filing an ARP or calling Crime Stoppers. When questioned about the Crime Stoppers Posters, however, they were all familiar with them. They were mostly unable to answer whether or not this information was included in the Handbook, but both general reporting to staff guidance and information on reporting to Crime Stoppers are both included in the Handbook.

Department Regulation OP-A-15 allows multiple means for offenders to report sexual abuse, harassment, retaliation, and/or staff neglect. This includes both verbal or written reports to staff via letter through institutional mail or regular mail and also the Administrative Review Procedure (ARP). In addition, LA DOC has a Memorandum of Understanding with the Crime Stoppers organization statewide via a hotline number posted in all units, posters observed during the site review. The Crime Stoppers hotline is EHCC's outside reporting entity as required by this standard. EHCC had an earlier deficiency in providing segregated offenders an avenue to report sexual abuse to an outside entity, so EHCC entered into an MOU with Louisiana Foundation on Sexual Assault (LaFASA) to give offenders who do not have routine phone access a place to write and report allegations of sexual abuse. Upon entering into a unit where offender phone access is restricted, offenders are provided a flyer with the address of the advocacy organization. Additionally, the address for LaFASA is painted on the cellblock walls.

The LaFASA PREA Advocacy manager did not respond to emails or phone calls.

EHCC interviewed senior staff, including the Warden, indicated that they do not house offenders solely for civil immigration purposes, however offenders of foreign citizenship are still allowed to contact their respective Consulate. In the event that EHCC should house an offender solely for civil immigration purposes, the institution has documentation available regarding contacting consular officials and the Department of Homeland Security.

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 every staff member indicated they would not need to remain anonymous and would simply use their chain of command.

Since allegations are identifiably being reported, tracked, are received by appropriate law enforcement and advocacy agencies, and are resulting in investigations and follow-up, and since offenders and investigative and PREA staff interviews indicate that action by management is occurring as required, this standard is compliant.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The agency has an Administrative Remedy Procedure (ARP) for dealing with offenders' grievances regarding sexual abuse.

The agency has an administrative procedure for dealing with offender grievances regarding sexual abuse. Five (5) grievances in the past 12 months alleged sexual abuse. All grievances reached a final decision within 90 days after being filed and there were no extensions because all final decisions were reached within 90 days. 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 but Department Regulation OP-A-15 indicates that an offender *may* use the Administrative Remedy Procedure (ARP) as a means to report sexual abuse and misconduct.

DOC policy requires decision on the grievance relating to sexual abuse and/or sexual harassment 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. In practical terms, however, the PREA Compliance Manager and Warden indicated that any ARP related to sexual abuse is always initially treated as an emergency until involved offenders are safely situated.

Agency policy or procedure allows an offender to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. Offenders may also use any informal method of their choice, including institution mail, to report sexual abuse and/or sexual harassment. The offender's report does not have to be submitted to or via any staff member who might be the subject of the complaint.

Third parties, including fellow offenders, staff members, family members, attorneys, and outside advocates can assist offenders in filing requests for administrative remedy as it pertains to sexual abuse or sexual harassment. Third-party grievance 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 has to complete the "ARP Drop Form."

In the past 12 months, no offender grievances alleging sexual abuse resulted in disciplinary action by the agency against the offender for having filed the grievance in bad faith and no emergency grievances alleging substantial risk of imminent sexual abuse were filed.

The facility documents all actions taken in response to any grievance and the final decisions or actions taken.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Although contact information for reporting allegations to Crime Stoppers is provided to the population and the posters are very well known, some offenders interviewed were unaware that they could call a victim advocate agency for advocacy, assistance and support regardless of when or where abuse may have occurred.

However, general information with Victim Advocate Agency contact details is provided at Intake, and LaFASA (LA. Foundation Against Sexual Assault) and flyers with contact information are posted in all units. There is an existing MOU with LaFASA. The auditor emailed and called to arrange an interview with the LaFASA PREA manager but phones were not answered, nor did a call back or email reply occur.

EHCC mental health staff have been trained as Victim Advocates in the event they are needed. The Sexual Trauma Awareness and Response organization (STAR) is the local crisis response agency for victim advocacy and support, as designated in State guidance regarding management of forensics and Sexually Oriented Crimes (SOCO). **In view of the guidance from the region that STAR also provides follow-up assistance and support, the facility should provide access to, and contact information for STAR to all offenders and to develop an MOU as appropriate.** Louisiana does provide an MOU with LaFASA for statewide management of advocacy and crisis responses, but the system is also designed to focus facilities more specifically on using the actual local crisis agency, in this case STAR. Their function is currently limited to service only at the hospital; then, facility victim advocates provide advocacy services inside EHCC; and LaFASA is the current designated crisis support agency for offender support.

Currently, the on-property medical center can be utilized for medical evaluations and treatment following an allegation of sexual abuse, so facility mental health staff are utilized as victim advocates if one is requested by the offender; outside advocates are available and utilized at the local hospital (Our Lady of the Lake) used by EHCC. Offenders are asked at the time of the investigation if they wish to request or to receive outside assistance from victim advocates for emotional support.

Information regarding access to LaFASA needs to be clarified to offenders who may need outside agency support and this information needs to be provided in the Offender Orientation Manual. It is not enough to offer advocacy services at the time of an abuse or allegation, most offenders' abuse occurred prior to confinement and they may still be in need of support. Access to a local crisis/advocacy agency is intended to be routinely available and this access information should be provided at Intake/Orientation.

In EHCC's case, where an MOU with LaFASA exists for reporting allegations, it is also necessary to enable the contact with LaFASA to provide for anonymity, including privacy from mail review, and these are two requirements that are not mandatory if only advocacy and support is provided, these requirements are just for reporting allegations.

	<p>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 for investigation. The telephone service contractor has eliminated any need for use of an offender pin number.</p> <p>An April 23 email from the PCM/Assistant Warden informed the Auditor of steps taken to address this issue:</p> <ul style="list-style-type: none"> - Offenders were given instruction on using LaFASA and STAR both - Posters with access info are now placed on all bulletin boards in all units - Information on STAR will be added to the next issue of the Handbook, which is updated annually. <p>These actions satisfy most of the issue, however the Auditor requested a copy of the posters. Additionally, information is requested that addresses that calls to LaFASA must be anonymous and not require use of a PIN, just like calls to Crime Stopper, since the MOU with LaFASA also provides for reporting, not just advocacy. This has been completed and provided to the Auditor July 24, 2023.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The agency or facility provides a method to receive third-party reports of offender sexual abuse or sexual harassment and publicly distributes information on how to report offenders' sexual abuse or sexual harassment on behalf of offender on the website.</p> <p>EHCC provides information regarding ways to report sexual abuse to visitors by posting information in the visiting room and handbook, and information regarding third-party reporting can also be found on the Louisiana Department of Corrections website (www.doc.la.gov). While talking with and interviewing offenders, it was determined that they felt confident their family or friends could contact the facility and most offenders believed their allegations would be addressed.</p> <p>EHCC methods in place to receive third-party reports of sexual abuse and sexual harassment include calling Crime Stoppers, filing a grievance, use of institutional mail or use of regular mail. Posters and the offender handbook provide information to access third-party reporting. Crime Stoppers, when called, forwards the complaint to the DOC PREA Coordinator who forwards it to the appropriate PREA Compliance Manager and also tracks the outcomes.</p> <p>Third parties (which may include victim advocacy agencies, other offenders, unit staff, family members, and attorneys) may also assist offenders by making sexual abuse harassment reports, and/or initiating formal grievances. The prison documents offenders who decline to continue with the grievance once a third party initiates the process.</p>

115.61	Staff and agency reporting duties
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 1437 454">Department Regulation No. OP-A-15 requires that all allegations of sexual abuse be treated confidentially and explains the reporting of allegations of sexual assault or misconduct.</p> <p data-bbox="256 497 1461 611">Staff reporting procedures are covered in annual training. Staff interviewed indicated they were aware of how to report an incident. Copies of Unusual Occurrence Reports (UOR) reviewed in investigation files verified that.</p> <p data-bbox="256 654 1461 813">Staff is required to report immediately any knowledge, suspicion, or information regarding an incident or allegation of sexual abuse or sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to an incident of abuse, of sexual harassment, or of retaliation that occurred in the facility.</p> <p data-bbox="256 855 1437 1048">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.</p> <p data-bbox="256 1090 1422 1249">Apart from reporting to their designated supervisor, the staff has 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 policy to make treatment, investigation, and other security and management decisions.</p> <p data-bbox="256 1292 1461 1485">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 who are considered vulnerable, any allegations to the appropriate State or local service agency under mandatory reporting laws.</p> <p data-bbox="256 1527 1461 1765">All allegations of sexual abuse and sexual harassment are reported to Investigations, including third-party and anonymous reports. Any allegation of sexual abuse is reported to DOC's PREA Coordinator and facility PREA Investigator immediately following the notification to the Warden. The assigned investigator immediately notifies the mental health Victim Advocate (but no later than the next business day), that an alleged sexual abuse has occurred.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>In the past 12 months, there was no instance that the agency or facility determined that an offender was subject to a substantial risk of imminent sexual abuse. There is a coordinated plan that has proper procedures to ensure offender safety.</p> <p>Although there were no allegations alleging potential for substantial risk of imminent abuse, immediate steps are taken when the facility learns that an offender might be subject to any such substantial risk of imminent sexual abuse. PREA time limits of 48 hours for initial response and 5 days for resolution are observed in the facility policy and process and, in actuality, the response begins immediately. The EHCC policy is that any allegation is to be treated as an imminent risk until the offenders are safely positioned.</p> <p>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. Staff interviews were uniformly consistent in addressing and supporting this requirement.</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>In the past 12 months, six allegations were received by the facility that an offender was abused while confined at another facility. All were investigated according to DOC protocols. Agency policy requires that the facility head provide responsive notification back to the other facility as soon as possible, but no later than 72 hours after receiving the allegation.</p> <p>In the past 12 months, two allegations of sexual abuse the facility were received from other facilities regarding alleged abuse at EHCC, and these were also investigated as required in all cases.</p> <p>Allegations received from other confinement facilities that an offender was sexually abused while confined at EHCC are reported directly to the Warden and he reported in his interview that he ensures that all allegations, from any source, are investigated in the same manner as required for any allegations This was supported by interviews with the Investigator and the PREA Compliance Manager.</p> <p>Upon receiving an allegation from an offender at EHCC 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 EHCC 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.</p>

Documentation of the notification is also logged in the “case” logbook.

115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

In the past 12 months, there were 36 allegations, and one pending, that an offender was sexually abused, and there were 18 times the first security staff member to respond to the report separated the alleged victim and abuser. There were no allegations where staff were notified within a time period that still allowed for the collection of physical evidence.

The agency has a first responder policy for allegations of sexual abuse and the first security staff member to respond to the report shall be required to:

- Separate the alleged victim and abuser;
- Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- Preserve and protected any crime scene until appropriate steps could be taken to collect any evidence.
- Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.
- Ensured 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
- 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.

Agency policy requires that if the first staff responder is not a security staff member, that responder is required to:

- Request that the alleged victim not take any actions that could destroy physical evidence; and/or notify security staff. Of the allegations that an inmate was sexually abused made in the past 12 months, there were 2 times a non-security staff member was the first responder and both were reports to MH staff who immediately requested that the alleged victim not take any

	<p>actions that could destroy physical evidence and then reported them to security supervisors.</p> <p>EHCC has provided all staff with a 'PREA Card' outlining the role and responsibility of a first responder and also including initial supervisory steps as well. EHCC conducts routine training at roll call providing staff instructions and expectations should they serve as a first responder. Documentation was viewed indicating all staff participated in the routine training and the annual refresher training required for all staff.</p> <p>All staff interviewed, including non-uniformed staff, were well familiar with proper steps and procedures for initial responses to an incident, and had their PREA card with required steps in their possession.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership. The plan steps are also given every staff member on a PREA First Response card and all staff interviewed had good responses on required steps as a response to an incident.</p> <p>EHCC has provided all staff with this 'PREA Card' outlining the role and responsibility of a first responder and also including initial supervisory steps as well. EHCC conducts routine training at roll call providing staff instructions and expectations should they serve as a first responder or be involved in an incident or allegation. Documentation was viewed indicating all staff participated in the routine training and the annual refresher training required for all staff.</p> <p>All staff interviewed, including non-uniformed staff, were well familiar with proper steps and procedures for initial responses to an incident, and had their PREA card with required steps in their possession.</p> <p>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 offender aggressor. The offender accused of predatory behavior is always evaluated by mental health staff prior to the disciplinary hearing of the violation. EHCC conducts a mental health evaluation of all known abusers within 60 days of learning of such abuse history and after treatment when deemed appropriate by mental health practitioners. This is documented utilizing the 'Mental Health Evaluation for Substantiated Cases of Sexual Assault' Form.</p> <p>The credibility of an alleged victim, suspect or witness is assessed on an individual</p>

basis and not be determined by the person's status as detainee or staff.

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.

EHCC employs a Coordinated PREA Response Checklist which shows the initial responsibilities of staff and a checklist for the notification of Medical, Mental Health, Investigators and facility leaders. The completed checklist is filed with the investigation documents.

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 their own requirements and just some of the requirements of their supervisors.

EHCC Policy on Actions Required After Report of Sexual Abuse

When staff learns that an offender is subject to a substantial risk of imminent sexual abuse, take immediate action to protect the alleged 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.

- Only designated employees specified by the policy should be informed of the incident, as it is important to respect the victim's security, identity, and privacy.
- All allegations of sexual abuse are to be handled in a confidential manner throughout the process and investigation.
- All conversations and contact with the victim should be sensitive, supportive, and non-threatening.

Initial Responder:

- Intervene in any assaults and separate the alleged victim and ensure safety
- Detain the offenders involved and witnesses
- Call for emergency medical care for the victim, if appropriate
- Immediately notify the supervisor and remain on the scene until relieved by responding supervisory staff
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence, DNA, etc.
- 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 staff involved with investigating the alleged
- Document detailed description of:
 - Victim and abuser locations and affect (emotions, appearance,)
 - Wounds and where they are
 - Anything the victim or abuser reported to you

Shift Supervisor follows the below procedures:

Notify immediately the Warden or designee, the PREA Compliance Manager, and the Investigator. The Investigator assumes control.

- Assign an officer to remain at the crime scene to protect the evidence
- 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 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 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.

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 Note: Only person(s) allowed to enter the crime scene are assigned investigators, medical staff, and the Warden or designee.

- Video and photograph the crime scene area before the removal of any items from the
- Identify staff that will touch and/or handle evidence or crime scene
- Incidents are fully
 - Log Book
 - Security Video
 - Photos

Notifications Required when Sexual Abuse is Alleged: Ensure 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 specifics 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.

Responsibility when Sexual Harassment is Alleged

Some offender allegations rise only to the level of sexual harassment, not sexual abuse. For allegations of sexual harassment, responding supervisory staff:

- Ensure that the alleged victim and abuser are detained
- A brief inquiry will be made to each individual separate and apart from each other to ascertain if the sexual behavior was consensual or nonconsensual.
- Ensure that the supervisor and the investigator are notified
- Incidents of this sort are fully investigated
- 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.

VI. 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 identified and detained
- 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
	The agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has renewed collective bargaining agreements since the last PREA audit, and included provisions require that there be no significant restrictions on the agency's ability to protect staff and offenders, including issuing contact restrictions.

	<p>LA DPS&C has an agreement with AFSCME, and the Union Contract addresses the working environments for Department employees who choose to join the union. The agreement does not prohibit the Department of Corrections from disciplining employees who have violated PREA or from suspending alleged staff perpetrators during the investigation.</p> <p>Interviews with the DPS&C PREA Coordinator and an EHCC Contracts staff report that EHCC and LA DPS&C have no limits on EHCC'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. As with any State, LA has a Personnel Board and HR requirements to ensure fair hearing procedures and treatment.</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The agency has a policy to protect all offenders and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other offenders or staff. The agency designates mental health staff members with monitoring for possible retaliation and the interview reflected that recommended and required protection measures are checked and instituted. All monitoring is for a minimum of 90 days or as necessary beyond that length of time.</p> <p>Retaliation is prohibited 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 Medical Services is responsible for collaborating with the Mental Health Retaliation Monitors 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.</p> <p>She indicated she maintains contact even in cases determined to be unfounded. Further, her interview indicated that the 90 days was a guideline and is exceeded when appropriate.</p> <p>There are multiple protection measures in place for offenders or staff who fear retaliation for reporting sexual abuse or sexual 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. Mental health services are always available to offenders by writing to mental health.</p> <p>Except in instances where EHCC determines that a report of sexual abuse is</p>

	<p>unfounded, the facility does the following for at least 90 days following a report of sexual abuse:</p> <ul style="list-style-type: none"> • Monitor the conduct and treatment of offender 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; • Monitor offender disciplinary reports; • Monitor offender housing changes; • Monitor offender program changes; • Monitor negative performance review of staff; • Monitor reassignments of staff; • Continue monitoring beyond 90 days if the initial monitoring indicates a continuing <p>Offenders receive a periodic status check for at least 90 days following a report of sexual abuse; the EHCC Mental Health Retaliation Monitor monitors the conduct and treatment of offenders or staff who reported the sexual abuse and offenders who were reported to have suffered sexual abuse. If any changes suggest retaliation, the Monitor discusses them with the PREA Compliance Manager in order to act promptly to remedy any such retaliation. Items monitored include offender disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.</p> <p>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.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	No offenders who alleged to have suffered sexual abuse were assigned to involuntary segregated housing in the past 12 months. DOC does have policies that implement required reviews within required time frames if it were to occur but policy is to avoid such use of any segregation.

	<p>Department Regulation OP-A-15 prohibits offenders at high risk for sexual victimization from being placed in segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. EHCC has developed a 24- hour review/ status check form for offenders who are placed in involuntary segregation. The form states the reason for the use of involuntary segregation.</p> <p>Staff making use of involuntary segregation must contact the PREA Compliance Manager, Investigator or Duty Warden immediately.</p> <p>During the on-site review, investigator and PREA Compliance Manager interviews reflected that protective custody is rare and that it is managed by the mental health unit. If an offender requests protective custody (PC), he can go to a single cell while the investigation is completed but, during that time, Mental Health staff interview and evaluate the offender and then the PC (Protective Custody) Committee determines the safest location for housing. There was one request for PC following a PREA incident, and the offender victim returned to the general population after the aggressor was transferred to a different prison.</p> <p>There were no offenders who alleged sexual abuse who were held in involuntary segregated housing in the past 12 months. If one had been, the case files would include both a statement of the basis for the facility's concern for the offender's safety, and the reason or reasons why alternative means of separation could not be arranged. If an involuntary segregated housing assignment were made, the facility would provide each such offender a review every 30 days to determine whether there is a continuing need for separation from the general population.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>There were several numbers related to investigations that were inconsistent initially but the facility then reviewed all data and corrected it.</p> <p>There were 36 investigations in the past 12 months. Twenty findings of offender-on-offender abuse resulted from these investigations and, of those, there were two substantiated allegations of conduct that appeared to be criminal that were referred for prosecution. .</p> <p>Department Regulation OP-A-15 gives the agency process and gives specific steps to be followed when an allegation of sexual abuse is made. EHCC refers serious incidents to the Iberville Parish Sheriff's Office and stay informed on the progress of the investigations through continuing contact with the assigned Sheriff's Investigator.</p>

The DPS&C Secretary has appointed a senior headquarters staff member (Director of Investigations, Investigative Services Division), 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, according to the interview with the Director of Investigations, a request is submitted to him at headquarters. His HQ position also tracks SAFE/SANE evaluations and enters required data into the annual State report on investigations.

Incidents involving criminal acts of sexual assault and sexual misconduct where local law enforcement is not conducting the investigation are to be conducted by an investigator who is acting under the authority of DOCs HQ Director of Investigations or the DOC 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, EHCC 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 DOC policy. 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. 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.

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 (especially 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

	<p>findings.</p> <p>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.</p> <p>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. 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.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	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. This is in policy and per interviews with the Investigator and Assistant Warden.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	There were 36 administrative investigations of alleged offender sexual abuse that

were completed by the agency/facility in the past 12 months, and all offenders were notified, verbally or in writing, of the results of their investigation and the offenders sign for the information's receipt.

If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the offender of the outcome of the investigation. There were zero criminal case notifications in the past 12 months.

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, the investigator interviewed stated that she 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 of the files of investigations of alleged sexual abuse had documented results reported back to the offender 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

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
- These notifications are documented in the case

The investigator interview stated that investigators notify offenders of investigative outcomes and indicated that all notifications use the Notification of "Outcome of PREA Allegation" form for substantiating delivery of the notice.

	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In the past 12 months, one staff from the facility was found have violated agency sexual abuse or sexual harassment policies and was terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies, and was also reported to the appropriate licensing authority. No discipline less than termination was administered to other staff.</p> <p>LA DPS&C Policy OP-A-15 does outline that staff violating the DOC sexual abuse and sexual harassment policy may receive disciplinary action up to and including termination. Regulation OP-A-15 also requires substantiated allegations to be forwarded to the local District Attorney for a decision regarding prosecution or forwarded to the relevant professional licensing boards.</p> <p>The seriousness of the conduct is considered in determining the appropriate response according to the interview with the Warden. Serious sexual harassment complaints, even if committed once, are still addressed by the Warden or leadership designee. Disciplinary sanctions are commensurate with the nature and circumstances of the acts committed, the employee's disciplinary history, and the sanctions imposed for comparable offenses.</p> <p>Louisiana state law includes a specific provision that defines sex between the Department of Corrections officials and people in their custody as malfeasance in office and specifically states that “sexual conduct (is) prohibited with persons in the custody and supervision of the Department of Public Safety and Corrections.” It carries a sentence of up to 10 years in prison and fines up to \$10,000. This statute is in addition to Louisiana laws governing rape, which carry even harsher sentences.</p> <p>Lawmakers also has a law that explicitly states how a person is incapable of giving consent when “the person is under arrest or otherwise in the actual custody of a police officer or other law enforcement official.” Correctional officers in Louisiana are considered law enforcement agents.</p> <p>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.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>In the past 12 months, no contractors or volunteers were reported to law enforcement</p>

	<p>for engaging in sexual abuse of offenders but protocols and policies are in place when needed. There are 535 trained volunteers, although far fewer come on a regular basis, and seven contractor personnel.</p> <p>Department Regulation OP-A-15 specifies that 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 boards. No volunteers or contractors were reported to law enforcement and/or their respective licensing boards during the past 12 months.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In the past 12 months, 22 administrative findings of offender-on-offender sexual abuse occurred at the facility, and no findings of criminal level abuse, from a total of 36 allegations. There were 2 referrals out for criminal investigations.</p> <p>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 (aggravated sexual offenses) violation. Sanctions are commensurate with the nature and circumstances of the abuse committed and include the offender's disciplinary history and comparable offenses by other offenders, as well as consideration for the offender mental status and condition.</p> <p>Offenders are not 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.</p> <p>Mental health staff and the PREA Compliance Manager interviewed indicated that the disciplinary process takes into consideration the mental faculties of the offender who perpetrated the act when determining the sanctions. EHCC has a process in place to ensure the hearing officer receives input from mental health prior to hearing the violation. 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 a reasonable belief that the alleged conduct occurred is not false reporting or considered lying. Decisions are based on the preponderance of the evidence.</p>

115.81	Medical and mental health screenings; history of sexual abuse
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	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>In the past 12 months, 100% of offenders who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner, according to OAS PAQ entries.</p> <p>In the past 12 months, 100% of offenders who have previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner.</p> <p>All offenders at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner within 14 days. 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 facility PAQ and PCM interview indicate that 100% of these offenders were offered follow-up interviews. 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. To ensure compliance, the facility has implemented the PREA Interview Form which is utilized by mental health when meeting with an offender who reported past sexual abuse. This form clearly documents the offender was seen due to his report of past sexual abuse during a Risk Assessment.</p> <p>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.</p>

<p>115.82</p>	<p>Access to emergency medical and mental health services</p>
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Offender victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, and the nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials that document emergency medical treatment and crisis intervention services.</p>

	<p>The medical staff supervisor interviewed supports this information, and it also appears very evident at EHCC, especially with their significant number of mental health offenders. EHCC's medical department services the prison population with 24-hour medical staff coverage which ensures immediate care.</p> <p>All PREA incident cards (carried by every staff member) list the preliminary steps to protect the offender-victim and include the immediate notification of medical and mental health staff.</p> <p>Victims of sexual abuse or sexual harassment are evaluated and treated, either on-site or at local hospitals, and also receive follow-up services that include treatment plans and referrals upon discharge. Referral to Mental Health always occurs and after-incident support is offered. Victim Advocates are available both on-site through Mental Health or at the hospital through trained staff.</p> <p>EHCC provides all victims of sexual abuse forensic medical examinations at an outside facility, Our Lady of the Lake in Baton Rouge, without financial cost to the victim, when evidentiary or medically appropriate and there were 3 such examinations in the past 12 months. There are no SANE staff at EHCC.</p> <p>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.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The facility offers medical and mental health evaluation and, as appropriate, treatment to all offenders who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The mental health staff provide evaluation and treatment of such victims and they also 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.</p> <p>Community level of care is the facility 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. Services provided appear consistent with community</p>

	<p>level of care.</p> <p>DOC Health Care Policy HCP-37 addresses the components of this standard. EHCC conducts a medical and mental health evaluation and offers treatment, as appropriate, to offenders who have a history of sexual abuse. This assessment is greater than a normal prison intake since EHCC serves as a primary DOC reception and diagnostic/intake center for 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. Staff reported, when applicable, they set up the continuity of care upon release. Interviews indicated care and counseling often continue for numerous months but can also continue throughout the incarceration.</p> <p>Mental health evaluations are required to be conducted on all-known offender-on-offender abusers within 60 days of learning of the abuse but are routinely done within 14 days. EHCC offers a sex offender program to such offenders if it appears appropriate to that case.</p> <p>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.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>In the past 12 months, 36 administrative investigations of alleged sexual abuse were completed at the facility, excluding only "unfounded" incidents. There were 20 investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review board (IRB) within 30 days, excluding only "unfounded" incidents. The two IRB members interviewed verified that the review format they use is modeled on the PRC and DOJ elements listed in the Standard.</p> <p>Department Regulation OP-A-15 requires a sexual abuse incident review at the conclusion of every substantiated or unsubstantiated sexual abuse investigation and EHCC 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.</p> <p>The review team includes upper management officials, (Deputy Warden, Assistant Wardens and PREA Compliance Manager, Investigators, Mental Health, Medical Department Representative, etc.) with input from line supervisors, investigators, and medical or mental health practitioners. The review team prepares a Sexual Abuse</p>

	<p>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. There is also a monthly Incident Review with HQ staff.</p> <p>The review team members interviewed all agreed that the review considers the following:</p> <ul style="list-style-type: none"> • 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 or augmented; • A report of the findings is submitted to the Warden. <p>Recommendations that are in the Warden’s control are normally implemented. Documentation is provided if a recommendation from the Incident Review team is not implemented.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The LA DPS&C PREA Allegation Database is the electronic collection of data to track all allegations of sexual abuse. This information is included in an annual report compiled by the Department's PREA Coordinator which is posted on the Department's website (www.doc.la.gov) for review by the public.</p> <p>The LA DPS&C monitoring instrument is used to collect and track uniform data of sexual abuse at facilities and includes all the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the U. S. Department of Justice’s Bureau of Justice Statistics. An aggregated assessment is made of the data annually and included in a compiled 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.</p> <p>DPS&C Procedures for Reporting to the United States Department of Justice:</p> <ul style="list-style-type: none"> • 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. • An Incident Form is prepared for each substantiated sexual victimization

	<p>allegation reported at a Department facility and is created by the PREA Investigator at the facility where the incident occurred.</p> <ul style="list-style-type: none"> • 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 in the prior calendar • A second report is completed by DPS&C's PREA Investigator which includes all privately- operated prisons 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 • 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.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>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 DOC. The annual report contains statistics for the Fiscal Year reporting and can be compared to the previous year data. The Warden and PCM stated that the Warden approves the Annual Reports and submits them to the parent agency (DOC). There are also automated monthly reporting mechanisms for this data area. Reviews of this data are accomplished at each level for analysis, determining trends or needs, etc.</p> <p>On a yearly basis, the agency PREA Coordinator reviews the collected and aggregated data to identify areas in need of corrective action, then develops an annual report which is approved by the Chief of Operations and the Secretary and made available on the agency's website.</p> <p>Investigations leadership review all details of both criminal and administrative investigations, 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</p>

	<p>Standardized Case Report Format, which includes descriptions of physical and testimonial evidence as well as the reasoning behind credibility assessments and findings.</p> <p>For annual reporting purposes redaction is not needed as the report only contains statistical data and does not refer to any identifiable individual(s).</p>
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115.89	Data storage, publication, and destruction
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	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>All data is securely preserved and retained in accordance with the procedures outlined in 115.87. In accordance with the Department Records Management Program rules, Investigative Reports are retained while Active plus a minimum of six years.</p> <p>DPS&C makes an annual report regarding all sexual abuse data from DPS&C facilities available to the public through its website www.doc.la.gov. EHCC provides its data to the PREA Coordinator and PREA allegations are tracked through a secured database that can be easily accessed by the State Institutions. The report consists of numbers only; DOC philosophy is that anonymity will ensure the integrity of the process and encourage the reporting of all PREA allegations in the future.</p> <p>All PREA Audit Reports are published at the DOC website.</p> <p>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 the 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.</p> <p>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.</p> <p>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 be archived.</p>
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115.401	Frequency and scope of audits
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	Auditor Overall Determination: Meets Standard
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	<p>Auditor Discussion</p> <p>The Warden, PREA Compliance Manager, and staff were extremely supportive and made all efforts to ensure full access and ease of audit operation for the auditor, both before and after the site visit and during the time at the prison. There were no impediments or lack of any type of access.</p>
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115.403	Audit contents and findings
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>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 www.doc.la.gov.</p> <p>All agency past audit reports are included, and this Audit Report will be published on the website when it is final.</p>

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

	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
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	na

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
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	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
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.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

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

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
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	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
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.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
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?	no
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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
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	yes

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

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
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,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
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	yes

	abuse or sexual harassment or retaliation?	
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	yes

	response to an incident of sexual abuse?	
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	yes

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

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

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

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
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	yes

	evidence sufficient to substantiate the allegation?	
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).	na
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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	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	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	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	Audit contents and findings	

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