

# PREA Facility Audit Report: Interim

Name of Facility: Lake County Residential Reentry Program

Facility Type: Prison / Jail

Date Interim Report Submitted: 06/22/2017

Date Final Report Submitted: 08/11/2017

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Angel Baez-Sprague, MS	Date of Signature: 08/11/2017

AUDITOR INFORMATION	
Auditor name:	Angel Baez-Sprague
Address:	1920 Technology Parkway Mechanicsburg, PA 17050
Email:	<a href="mailto:abaez-spra@pa.gov">abaez-spra@pa.gov</a>
Telephone number:	717-728-4113
Start Date of On-Site Audit:	2017-05-25
End Date of On-Site Audit:	2016-05-26

FACILITY INFORMATION	
Facility name:	Lake County Residential Reentry Facility
Facility physical address:	5565 South M-37 Baldwin, MI 49304
Facility mailing address:	Same as physical address
The facility is:	County Federal Municipal <input checked="" type="checkbox"/> State Military Private for profit Private not for profit
Facility Type:	<input checked="" type="checkbox"/> Prison <input type="checkbox"/> Jail

Primary Contact			
Name:	Matthew A. Silsbury	Title:	Departmental Analyst, PREA Unit
Email Address:	SilsburyM1@michigan.gov	Telephone Number:	517-281-7716

Warden/Superintendent			
Name:	Pam Jackson	Title:	Facility Supervisor
Email Address:	JacksonP6@michigan.gov	Telephone Number:	231-745-7330

Facility PREA Compliance Manager			
Name:	Pam Jackson	Title:	Facility Supervisor/ PREA Coordinator
Email Address:	JacksonP6@michigan.gov	Telephone Number:	231-745-7330

Facility Health Service Administrator			
Name:	N/A	Title:	
Email Address:		Telephone Number:	

Facility Characteristics			
Designed facility capacity:	300		
Current population of facility:	230		
Age Range	Adults: 18+	Youthful Residents:	N/A
Facility security level/inmate custody levels:	Parole Violators		
Number of staff currently employed at the facility who may have contact with inmates:	Lake County Sheriff Employees: 48 MDOC Employees: 13 Total Onsite Employees: 61		

AGENCY INFORMATION	
Name of agency:	Michigan Department of Corrections
Governing authority or parent agency (if applicable):	State of Michigan
Physical Address:	206 E Michigan Ave, Lansing, Michigan - 48909
Mailing Address:	Same as Physical Address
Telephone number:	(517) 373-3966

**Agency Chief Executive Officer Information:**

<b>Name:</b>	<b>Heidi E. Washington</b>	<b>Title:</b>	<b>Director</b>
<b>Email Address:</b>	<b>WashingtonM6@michigan.gov</b>	<b>Telephone Number:</b>	<b>517-780-5811</b>

**Agency-Wide PREA Coordinator Information**

<b>Name:</b>	<b>Todd W. Butler</b>	<b>Title:</b>	<b>PREA Administrator</b>
<b>Email Address:</b>	<b>ButlerT4@michigan.gov</b>	<b>Telephone Number:</b>	<b>517-373-3966</b>

# AUDIT FINDINGS

## **Narrative:**

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

A Prison Rape Elimination Act audit of the Lake County Rehabilitation Reentry Program (LCRRP) was conducted from March 25 to May 26, 2017, pursuant to audit consortium formed between the Maryland Department of Public Safety and Correctional Services, the Michigan Department of Corrections, the Pennsylvania Department of Corrections and Wisconsin Department of Corrections. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. I, Angel Baez-Sprague, conducted this audit and am a DOJ Certified PREA Auditor.

The auditor wishes to extend its appreciation to the MDOC Facility Supervisor Pam Jackson, Lake County Sheriff's Staff Sergeant Steven Wallager, MDOC Office of Community Corrections Manager Lindsey LaMontagne,, MDOC PREA Analyst Matthew Silsbury, and PREA Administrator Charles Carlson too include their respective staff for the professionalism they demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditor both during the site visit and post audit.

Prior to the audit, an agreement to utilize a zip drive to transmit volume data and paper reporting for the interim and final reports. Agency PREA Analyst provided relevant policy and audit documentation for review in advance of the audit through a flash drive that were subsequently downloaded and stored onto an encrypted flash drive before upload into the OAS by the auditor for the completion of this report. A review of pre-audit documentation took place in advance of the audit and supplemental document request were made onsite as well as during the post audit period.

An entrance meeting was held on the morning of May 25, 2017, beginning at approximately 0830 hours. The auditors were greeted by the facility's administrative team and the agency's PREA staff to include MDOC Facility Supervisor Pam Jackson, Lake County Sheriff's Staff Sergeant Steven Wallager, MDOC Director Lindsey LaMontagne, MDOC PREA Analyst Matthew Silsbury, and PREA Administrator Charles Carlson.

After the entrance meeting the auditor was given a tour of all areas of the facility, including; all living quarters (Male and Female), showers, restrooms, single cells areas (prior segregation cells), dining areas, recreation (day) rooms, outside recreation areas, administration area, Supervisor Offices, Parole Agent Offices, Deputy's control centers, laundry areas, treatment/group rooms, and Medical examination areas. Additionally, this auditor was provided access to view camera angles from the staff vantage point and supervisor's secure office.

During the tour, the auditor observed the control center's camera monitoring station to verify that cameras were position in such a way as to provide adequate coverage of the housing units, yet afford privacy in bathroom/shower areas of the facility. Observation cell monitors had appropriate covering of the toileting areas within the cells to prevent viewing. On each of the housing units, a privacy notice was posted in the bathroom/shower areas, reminding inmates of the potential for opposite gender staff to view them. Inmates are required to be fully dressed when walking to and from the shower areas of the facility to limit

the potential for opposite gender viewing. On the tour, the auditor took notice to the robust "Knock and Announce" notices posted at the entrance to each housing unit, reminding opposite gender staff of the obligation to knock and verbally announce their presence before entering the housing unit. During the tour, it was observed that opposite gender announcements were consistently made.

On the first day of the audit, the auditor was given a copy of the institution's shift rosters in order to select staff for random interviews. The Michigan Department of Corrections and Lake County have a relatively unique collaboration. This collaboration allows for the Michigan Department of Corrections to exercise administrative operations of Lake County Residential Reentry while contracting the security/general operations to The Lake County Sheriff's Office.

With this, the overall Administration of the facility is managed by Parole Supervisor Pam Jackson and the daily security operations are managed by Staff Sergeant Steven Wallager. Although Pam Jackson in the MDOC Administrator on site, each respective supervisor is responsible for their agencies staff. Mrs. Jackson directly supervises overall onsite contract compliance with Lake County Sheriff's office and MDOC Agents/Officers. Staff Sergeant Steven Wallager is responsible for Lake County Sheriff's Deputies and Medical providers.

Since there is a unique statewide distinction with in this collaborative operation that places the onus of daily operations on the respective agencies (and ultimately to the MDOC onsite Facility Supervisor), this auditor interviewed a sample of each respective agency in order to ascertain overall compliance with the standards. Additionally, volunteers outside of this contract were interviewed as well.

There were 13 MDOC employees, and 48 Lake County Sheriff Employees, for a total of 61 onsite employees. At minimum, one officer from each housing area was selected (covering the two 12 hour shifts), one person from each area of responsibility/classification, and 2 volunteers randomly selected. Given the limited amount of onsite staff, and their overlapping areas of responsibility, interviews were conducted and broken down in the following manner:

### **Interviews Conducted**

#### **MDOC Staff- total 5 Individuals- 10 areas of varying responsibilities**

- Agency Contract Administrator-1
- Designated Staff Member Charged with Monitoring Retaliation-1
- Incident Review Team-1
- Intermediate-or High-Level Facility Staff-1
- Investigative Staff-1
- PREA Compliance Manager/Coordinator-1
- Random Staff Sample-2
- Staff who perform Screening for Risk of Victimization and Abusiveness-1
- Warden or Designee-1

#### **Lake County Sheriff Staff (onsite Security Contract)- total 9 Individuals- 17 areas of varying responsibilities**

- Incident Review Team-1
- Intake Staff-1
- Intermediate-or High-Level Facility Staff-3

Investigative Staff-1

Medical and Mental Health Staff-1

Random Staff Sample-9

Staff who perform Screening for Risk of Victimization and Abusiveness-1

**Volunteer/Contractor- total 2 Individuals**

Volunteers and Contractors who have contact with Inmates-2

A total of 14 staff were interviewed (including random and specialized staff) with at least one staff member interviewed from each interview category specified by the PREA Resource Center's Interview Guide for Specialized staff, with the exception of the interviews related to educational staff who work with youthful inmates, line staff who supervise youthful inmates (youthful inmates are not housed at this facility), and Non- Medical Staff involved in cross gender searches. Interviews followed the format laid out by the PREA Resource Center's interview templates for each specialized category of staff and inmate interviews.

Random interviews also followed the format laid out by the PREA Resource Center's interview templates for random staff and inmates. Auditors addressed each question on the template tools with the subjects of the interviews. Responses were later compared against the standards to assist the auditor with determining compliance with the provisions of applicable standards. The auditor notes that, due to some staff fulfilling multiple roles within the facility, certain staff members who were interviewed represented more than one category of interview (i.e. the local PREA Coordinator satisfied the PREA Compliance Manager, Retaliation Monitoring Staff and Incident Review Team Member).

Inmate interviews were conducted throughout the two day Audit. Staff supplied a list of all offenders in the program and a random sample was selected from that list. During the tour several inmates that self-identified as LGBTI/Transgender and having disabilities were also selected and requested to provide interviews. A total of 13 inmates were interviewed with at least one inmate interviewed from each interview category specified by the PREA Resource Center's Interview Guide for Inmate Interviews, with the exception of the interviews related to youthful inmates (youthful inmates are not housed at this facility).

The auditor does note that, due to the limited pool of available inmates, certain inmates who were interviewed represented more than one category of interview (i.e. an inmate who reported sexual abuse also satisfied the interview for an inmate who was placed into segregation for reporting abuse). Given the limited amount of onsite staff, and their overlapping areas of responsibility, interviews were conducted and broken down in the following manner:

**Inmate- Male- total 9 Individuals- 5 additional interviews for specialized area**

Disabled and Limited English Proficient Inmates-3

Inmates who disclosed Sexual Victimization during Risk Screening-1

Random Sample of Inmates-9

Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates-1

**Inmate- Female- total 4 Individuals- 1 additional interviews for specialized area**

Random Sample of Inmates-4

Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates-1

Throughout the pre-audit, onsite audit, and post audit, open and positive communication was established between the auditor and both the Facility Supervisor and PREA Analyst Matthew Silsbury. The Auditor discussed all concerns with both parties. Through a coordinated effort by Mr. Silsbury, Mrs. Jackson, SSG Wallaby, and their respective staff members, all informational requests of the auditor were accommodated prior to the completion of the Interim Report.

When the audit was completed, the auditor conducted an exit briefing on May 26, 2017. The auditor explained that documentation would need to be reviewed further and any addition requests for information would be coordinated through the agency PREA Administrator.

This auditor was supplied with the following Policies, Contracts, and Formal Memorandums to review prior to, during, and post onsite tour:

**Policy, Contract, and Formal Memorandum Review:**

**Lake County Sheriff Department**

- Inmate Grievance Form (Lake County Sheriff)
- Policy T-0002 Booking Procedures
- Policy T-0011 Inmate Searches
- Policy T-0036 Zero Tolerance/PREA
- Lake County Sheriff & MDOC Residential Re-entry Program 2017 Staffing Plan
- Lake County RRP House Rules

**Michigan Department of Corrections**

- An End to Silence: Inmates' Handbook on Identifying and Addressing Sexual Abuse 3<sup>rd</sup> Edition, PREA Resource Center September 2014
- Annual PREA Statistics Reports 2014 & 2015
- Annual Staffing Plan Review CAJ-1027
- Collective Bargaining Agreement- Administrative Support Unit and Human Services Unit, UAW Local 6000
- Collective Bargaining Agreement AFSME AFL-CIO
- Collective Bargaining Agreement- Labor and Trades and Safety and Regulatory Units- Michigan State Employees Association
- Collective Bargaining Agreement- Scientific and Engineering Bargaining Unit- SEIU Local 517M
- Collective Bargaining Agreement- Technical Bargaining Unit- SEIU Local 517M
- Collective Bargaining Agreement- Security Unit Agreement SEIU 526M, CTW
- Contract (terms of agreement ends September 30, 2017) between County of Lake and the Department dated April 1, 2014.
- Director's Office Memorandum 2017-23 PREA Grievance Process
- Director's Office Memorandum 2016-21 Prisoner Mail
- Director's Office Memorandum Victims' Advocates dated November 28, 2016.



Employee Handbook, Department of Corrections

Facility Schematic

Facility Supervisor Memorandum Agency Protection against Retaliation dated March 9, 2017

Facility Supervisor Memorandum Data Collection dated March 7, 2017

Facility Supervisor Memorandum Inmate Education dated March 1, 2017

Facility Supervisor Memorandum PREA-Protective Custody dated May 25, 2017

Facility Supervisor Memorandum Use of Screening Information dated March 9, 2017

Internal Affairs Section Memorandum Investigation of Contractual Employees dated December 27, 2016

Legislative Corrections Ombudsman and Department of Corrections MOU finalized December 2014

Michigan State Police and Department of Corrections MOU dated September 30, 2015

Michigan Penal Code (Excerpt) Act 328 of 1931 750.520c Criminal sexual conduct in the second degree: felony

Organizational Chart January 2017

Operating Procedure- 03.03.140 Prohibited Sexual Conduct Involving Female Offenders at Lake County Residential Reentry Facility

Operating Procedure- 03.04.100H Health Care Management of Reported Sexual Assaults of Prisoners in CFA Facilities

Policy Directive- 01.01.140 Internal Affairs

Policy Directive- 02.01.140 Human Resource Files

Policy Directive- 02.03.100 Employee Discipline and Attachment A

Policy Directive- 02.05.100 New Employee Training Program

Policy Directive- 02.05.101 In-Service Training

Policy Directive- 02.06.111 Employment Screening

Policy Directive- 03.02.105 Volunteer Services and Programs

Policy Directive- 03.03.105 Prisoner Discipline with Attachment A and D

Policy Directive- 03.03.105B Class II Misconducts

Policy Directive- 03.03.140 Prohibited Sexual Conduct Involving Prisoners

Policy Directive- 03.04.100 Health Services

Policy Directive- 03.04.125 Medical Emergencies

Policy Directive- 04.01.105 Reception Facilities Services

Policy Directive- 04.01.140 Prisoner Orientation

Policy Directive- 04.04.100 Custody, Security and Safety Systems

Policy Directive- 04.04.110 Search and Arrest in Correctional Facilities  
Policy Directive- 04.05.120 Segregation Standards- with Variance CAJ-296  
Policy Directive- 04.06.180 Mental Health Services  
Policy Directive- 04.06.184 Gender Identity Disorder (GID)/Gender Dysphoria  
Policy Directive- 05.01.140 Prisoner Placement and Transfer  
Policy Directive- 05.03.118 Prisoner Mail  
Policy Directive- 03.03.130 Prisoner Telephone Use and Attachment B  
Policy Directive- 06.03.104 Residential Reentry Program Facilities  
PREA Administrator Memorandum 115.71 (h) dated July 21, 2016  
PREA Coordinator List November 9, 2016  
Physical Plant Division, Project Review and Approval CAH-135  
Prisoner Education Verification CAJ-1036  
Prisoner Guidebook CSJ-166 English and Spanish  
Prisoner Grievance Forms CAJ-1038 A and Appeal CAJ-1038 B  
Residential Reentry Program Eligibility Screening Form- Parolee Self Report CFJ-498  
Request for Proposal (RFP) for services section 3.8.B. outlines the requirement for bidders to comply with the Prison Elimination Act (PREA) of 2003 dated May 20, 2016.  
Risk Assessments Manual (PREA) August 12, 2015  
Risk Assessment Worksheet (PREA) CAJ-1023  
Risk Assessment Review LCRRP (PREA)  
Survey of Sexual Victimization, 2014 & 2015 State Prison System Summary Form SSV-2  
The PREA Manual dated April 24, 2017

The aforementioned documents were reviewed in conjunction with documents requested during tour and sample documents provided on the pre-loaded flash-drive in order to determine compliance with the Standards.

## Facility Characteristics:

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

Facility Narrative: <http://www.michigan.gov/corrections/0,4551,7-119-1435-186916--,00.html>

*The Department first opened the Lake County Technical Rule Violator (TRV) Center in 1991 which was located in a Lake County jail annex. Technical parole and CRP violators were placed in Lake County TRV in lieu of return to incarceration.*

*The program expanded in 1992 to include a portion of the former Huron Valley Women's Facility near Ann Arbor and in 1995, a coed Technical Rule Violation Center was added at Camp Gilman near Clarkston, which formerly housed women offenders. In 1998, the Department expanded the original TRV Center in Lake County. In 2004, the Gilman TRV Center was closed and female offenders were placed at the Grand Rapids Corrections Center-TRV. In January 2008, the Grand Rapids Corrections Center-TRV was closed.*

*In early 2008, the Department changed its focus from TRV centers to Residential Reentry Programs. Lake County Residential Reentry Program (LCRRP) falls under the jurisdiction of the Office of Parole and Probation Services within Field Operations Administration. Residents housed at this facility include both male and female parolees who are placed as a condition of their parole for 90-120 days. The offender may be required to attend and participate in specific programming prior to their release to the community. Offenders may also be placed at LCRRP to engage in programming as an intervention to address behaviors causing a downward spiral in their transition within the community.*

*Comprehensive and structured programming that is offered at LCRRP will include but is not limited to facilitated groups addressing Substance Abuse Education and Therapy, Cognitive Behavior Therapy, Employment Placement Assistance, Serv Safe, AA/NA, Public Works, Habitat for Humanity, Adopt A Highway and other programming including community service projects. Community service projects provide local non-profit agencies and communities with supervised work crews who are engaged in a variety of chores, including mowing grass and other manual work.*

*The intent of the program is to enhance public safety and parole success. Staff will assist offenders with their transition back to their communities by connecting residents with community-based partners to ensure a continuum of care, immediate engagement in program and access to needed services is provided.*

The facility is comprised of two housing units arranged around a central connecting corridor. The Perimeter is secured with a 12' perimeter fence, buried 6' underground that has three strands of barbed wire, a strand of Concertina wire, around the top. Additionally, there are camera systems deployed throughout the perimeter and inside of the facility. The facility also has audio recording capabilities deployed within the facility in the form of three microphones at the control desks.

The facility houses both male and female Parole violators in separate units. The facility maximum capacity is 300 beds total and is broken down, by gender, to 240 Male beds and 60 Female beds. During the tour the breakdown of active offender's by gender was 36 Females and 194 Males.

The separation of males and females at the facility is accomplished by implementing both physical and procedural barriers. Movement is strictly controlled to eliminate male and female offender interactions in hallways and physical barriers (in the form of locked doors and window covers between units) are strictly adhered to. Additionally, outside yard locations are separated and the times are staggered to eliminate verbal interaction.

During the audit tour and through informal interviews with staff and inmates, the auditor was left with the general sense that staff and inmates felt safe at the facility.

**Summary of Audit Findings:**

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Number of standards exceeded: 0

Number of standards met: 31

Number of standards not met: 0

Number of Standards Not Applicable: 1

(The total number of standards that were audited at the agency level) 8

**Specific corrective action recommendations include: 115.35:**

LCRRP contracted medical staff could not verify the medical staff had been properly trained with an acceptable training module. During interviews with the Medical Contractor it was clear that the individual was not properly trained and additionally it was not clear that the provider understood the requirements of the PREA Standards.

Contracted Medical and Mental health providers need to be properly trained with an appropriate specialized training module. Additionally, they need to acknowledge understanding of the training provide.

Administration has noted that this must occur, be documented and the information transmitted to this Auditor.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

**Specific corrective action recommendations include: 115.41:**

During Interview with the Staff that conduct the Initial PREA Risk Assessments, and Reviews, it was determined that the answers to the Assessment were not secured in a location that would protect the information from being exploited to the inmate's detriment by staff or other inmates.

Administration will need to gather the current forms from the varying locations and store them in a location that is secure. Additionally, Administration is going to need to develop a process to safeguard the information and provide the new direction to staff and the location of storage.

On 6/30/2017 LCRRP provided documentation that all PREA Risk Assessments, and Reviews are being stored electronically and only retroactively accessible to the Facility Supervisor. Screenshots of the electronic system were provided as well as the scanned Risk Assessments that are being stored.

On 7/6/2017 LCRRP provided documentation that the practice of storing the PREA Risk Assessments in a secure locked cabinet is continuing. They also provided a photo of the lock cabinet that is located in the

Supervisor's locked office. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

**Specific corrective action recommendations include: 115.81 and 115.83:**

During interviews with inmates and staff it was determined that the individual whom had experienced sexual victimization were not being offered follow-up meetings with a medical or mental health provider.

With this, there was no indication that if the facility learned of an inmate with a history of known inmate-on-inmate abuse, that sufficient procedures are in place to ensure said inmate would be offered mental health evaluation as required by provision (b) of the standard.

LCRRP will need to ensure that proper medical and mental health referrals are being offered, and documented, for victims of Sexual Abuse within 14 days of the intake screening.

LCRRP will need to ensure that proper mental health referrals are being offered, and documented for perpetrators, of Sexual Abuse within 14 days of the intake screening.

LCRRP will need to ensure that the contracted medical providers are properly trained in accordance with standard 115.35 and understand the requirements of this standard.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

Provide 90 days of documentation that the practice is occurring through August 26, 2017. If no such example presents itself in support of this standard, the auditor will accept verification of staff training on the subject as a means to verify procedures have been established to ensure compliance. All training materials shall be approved by the auditor and confirmation of dissemination will be required.

115.81 and 115.83 shall have a 90 days after action review (part of the 90 days will be this period since the audit). Since 5-26-2017, the auditor, will require documentation that each person (victim identified was offered within the 14 days' timeline and if they wished received the appropriate medical/mental health follow up. The period will end 8/26/2017 after the auditor receives documentation that this has occurred and wanted treated is being carried out.

Additionally, if any inmate-on-inmate offenders are identified become known during this period, they will be offered mental health evaluation within the 60 day of learning the information.

On 6/26/2017 LCRRP provided documentation that all offenders currently at the facility who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. Additionally, they provided case notes to show if the offender accepted such service and where the referral was to. They have also begun implementing the practice with all arriving offenders who meet this criteria under the standards.

This process has begun and proceeding based on the information received and will be monitored for continued compliance through August 26, 2017.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

**On 8/10/2017 this auditor is satisfied that the deficiencies noted in this section have been corrected and show that the corrective actions are continuous/assimilated as LCRRP standard practices. The**

**Final Report will be dated 8/10/2017 and the additional 16 days of observation are not necessary given the validation and documentation provide over the past 60 plus days.**

## **Standards**

### **Auditor Overall Determination Definitions**

*Exceeds Standard (Substantially exceeds requirement of standard)*

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

*Does Not Meet Standard (requires corrective actions)*

### **Auditor Discussion Instructions**

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

## **115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

### **Auditor Overall Determination: Audited at Agency Level**

#### **Auditor Discussion**

- (a)** Agency policy 03.03.140 Prohibited Sexual Conduct Involving Prisoners and the PREA Manual outline the agency approach to implementing the zero tolerance policy. Local operating procedures OP 03.03.140 outlines the facility's approach to implementing agency policy covered by the agency policy and the agency PREA Manual. The auditor reviewed these documents in their entirety to determine compliance with provision. Lake County Residential Reentry Program (LCRRP) supplied multiple documents including: Lake County Sheriff Dept. Zero Tolerance PREA Policy/Procedure, Michigan Department of Corrections (MDOC) Prohibited Sexual Conduct Involving Female Offenders at LCRRP, and MDOC Policy Directive Prohibited Sexual Conduct involving Prisoners 03.03.140. Each policy provides clear and concise directions to staff regarding Zero-Tolerance.

The agency PREA Manual is a document that serves to unify the agency's approach to implementing the PREA standards that were previously covered by a network policies relative to such areas as segregation, employee training, prisoner placement, health care, etc. The agency PREA Manual supersedes all policies that were issued prior to its issue in April 24, 2017. The agency PREA Manual addresses relevant topics such as definitions, prevention, planning, training, placement screening, medical and mental health screenings, cross-gender viewing, searches of prisoners, protective custody, protection from retaliation, disabled and limited English proficiency inmates, human resource decision making processes, staffing plans, management rounds, facility and technological upgrades, contracting for the confinement of inmates, collective bargaining, reporting sexual abuse and sexual harassment, prisoner grievances, response procedures to reports of sexual abuse and harassment, medical and mental health services following an allegation of sexual abuse, victim advocates, confidential support services, sexual abuse and sexual harassment investigations, disciplinary sanctions and corrective action, sexual abuse incident reviews, data collection, data review and data storage, auditing and compliance.

(b) MDOC employs a fulltime Statewide PREA Manager in the Office of Legal Affairs Division who directly reports to the State Office Administrator. Subsequently, the State Office Administrator reports to the Senior Deputy Director. The Statewide PREA Manager is Todd Butler. Provision (b) was additionally audited at the agency level; however, it will be addressed in part in this report. According to the PREA Manual, the position of PREA Administrator fulfills the role of an Agency PREA Coordinator. This position is four layers removed from the agency Director with sufficient authority to implement agency efforts to comply with the PREA standards. During an interview with the PREA Administrator, it was explained that the title of PREA Administrator is used to accommodate existing Michigan Civil Service title rules. Through an interview with the PREA Administrator, he has sufficient time and authority to implement PREA standards throughout the agency.

According to the PREA Manual, the position of PREA Coordinator at the facility oversees the duties of a facility PREA Compliance Manager. This auditor was informed during an interview with the agency PREA Administrator that the agency titles were modified to accommodate existing Civil Service title rules within the state of Michigan. The facility PREA Coordinator is charged with ensuring the security of the Lake County Residential Reentry Program. Through an interview with the PREA Coordinator, the position provides adequate time and authority to coordinate the facility's efforts to comply with PREA standards.

(c) MDOC designates a PREA Analysts in each Area (Northern, Central, & Southern). A designated PREA Coordinator at each facility. The Northern Analyst PREA Analyst is Matt Silsbury and the PREA Coordinator at LCRRP is Supervisor Pamela Jackson.

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The position of PREA Administrator fulfills the role of an Agency PREA Coordinator. This position is four layers removed from the agency Director with sufficient authority to implement agency efforts to comply with the PREA standards. During an interview with the PREA Administrator, he reported that he has sufficient time and authority to implement the agency's efforts to comply with the PREA standards. The PREA Administrator remained on-site during the audit site visits to two recently audited facilities to assist with any agency related matters.*

## **115.12 Contracting with other entities for the confinement of inmates**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

(a) MDOC Contract dated April 1, 2014 (terms of agreement ends September 30, 2017) between County of Lake and the Department. Section 2- STATEMENT OF WORK, 26. Directs contractor to abide by State Policy 03.03.140 "Prohibited Sexual Conduct Involving Prisoners."

Additionally, MDOC Request for Proposal (RFP) for services section 3.8.B. outlines the requirement for bidders to comply with the Prison Elimination Act (PREA) of 2003. This RFP includes explanations of what is required to be in compliance.

(b) Contract Section 8- PERFORMANCE REVIEWS and Section 9- CANCELLATION outlines contract monitoring and cancellation for Material Breach by the Contractor

Based on the interview with the Agency Contract Administrator, coupled with review of the contracts, RFB, and Policy the auditor determined compliance with the provisions.

### **115.13 Supervision and monitoring**

#### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) The PREA Manual outlines staffing plan criteria too include the minimum considerations 1-11 outlined in the PREA Standards.
- (b) The PREA Manual indicates “In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.”
- (c) Interviews with Administration and staff concluded that the staffing plan has not been deviated from the staffing plan. The Facility has the luxury of having a pool of trained Lake County Sheriff’s Deputies onsite at the local jail that can fill in for staffing shortages, should they occur. Additionally, for the female side of the facility there are always 2 female deputies on shift. This practice was further validated in Random Inmate interviews.

The PREA Manual indicates that an annual review must be conducted annually and that the Warden/Administrator (Supervisor acts in this capacity at LCRRP) and PREA Coordinator shall assess, determine and document whether adjustments are needed to: The staffing plan established pursuant to this section; (2) The facility’s deployment of video monitoring systems and other monitoring technologies; and (3) The resources the facility has available to commit to ensure adherence to the staffing plan.

A Copy of the 2017 Staffing plan was supplied to this auditor with signed confirmation that the PREA Administrator had reviewed. Additionally, the PREA Annual Staffing Plan Review for CAJ-1027 was supplied. .

- (d) The PREA Manual directs Wardens, Deputy Wardens, Inspectors, Captains, Lieutenants to conduct and document rounds for PREA audit purposes, in addition to rounds conducted per PD 04.04.100 “Custody, Security, and Safety Systems.”

LCRRP has operates with a different rank structure. There is one MDOC Administrator on site who holds the position of Facility Supervisor, there are 3 ranking supervisor positions with the Lake County Sheriff’s (Staff Sergeant, Sergeant, and Corporal). The intermediate-level to high-level was identified as the MDOC Facility Supervisor (high-level), Lake County Sheriff Staff Sergeant (high-level), Lake County Sheriff Sergeant (intermediate-level), and Lake County Sheriff Corporal (low-level).

The PREA Manual prohibits staff from alerting other staff members when supervisory rounds are occurring unless such announcement is related to the legitimate operational function of the facility.

Interviews with the Facility Supervisor, Lake County Sheriff Staff Sergeant, and Lake County Sheriff Sergeants, coupled with review of logbook entries, indicates that intermediate-high level supervisors are routinely conducting unannounced PREA tours throughout the facility.



## 115.14 Youthful inmates

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a)– (c) The PREA Manual and Agency policy 05.01.140, Prisoner Placement and Transfer, restricts male and female prisoners under the age of 18 to two specific facilities within the MDOC system. Males Thumb Correctional Facility and Females to Women’s Huron Valley Corrections Facility.

MDOC does not refer, nor can LCRRP accept, any Youthful offenders to their program.

Agency policy 05.01.140, Prisoner Placement and Transfer, outlines that agency's approach to housing youthful inmates and were reviewed in determining compliance. Agency policy dictates that male youthful inmates are housed at the Thumb Correctional Facility (TCF) and female youthful inmates are housed at Women's Huron Valley Correctional Facility (WHV). If a youthful inmate must be placed at another facility for the purposes of medical or mental health care, the placement must be approved by an agency Deputy Director and accommodations for sight, sound and physical contact separation must be made.

During the audit tour, and through interviews with the Facility Supervisor, Lake County Sheriff’s Staff Sergeant, and PREA Coordinator, it was observed that LCRRP does not house youthful offenders and is therefore compliant with provisions (a) (b) and (c) of the standard.

## 115.15 Limits to cross-gender viewing and searches

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) 4.1.140 Search and Arrest in Correctional Facilities and the PREA Manual establish procedures to limit cross gender viewing and were reviewed in determining compliance with provision (a) of the standard. On the PAQ, the facility stated no cross gender strip searches or visual body cavity searches were conducted during this audit period.

Policy 4.1.110 permits a supervisor of the opposite gender to be present during a strip search if a supervisor of the searched inmate’s gender is not readily available. Readily available is not consistent with exigent circumstances as defined in the standards. Policy 4.1.110 does not specify who may view recorded body cavity searches (Y-4). According to the PREA Resource Center's FAQ's, a facility should use a privacy screen or other similar device to obstruct viewing of an inmate breast, buttocks or genitalia in cases where supervisors of the opposite gender are present with the inmate being strip searched.

During the tour with the Lake County Sheriff Staff Sergeant, Facility Manager, and agency PREA Analyst confirms that privacy screens are used when an opposite gender supervisor must be present during a strip search. The facility PREA Coordinator confirms that no cross-gender strip searches or visual body cavity searches were conducted to demonstrate compliance with provision (a) of the standard and clarified the ambiguity in agency policy.

- (b) The PREA Manual outlines search procedures and prohibitions while dually references PD 04.01.110 and PD 04.06.184

Policy 04.01.110, which was reviewed in determining compliance with provision (b) of the standard, permits searches of female inmates when female staff are not readily available to conduct a search in an emergency or where there is a reasonable suspicion that the prisoner is in

possession of contraband. Reasonable suspicion that the prisoner is in possession of contraband is not consistent with the definition of exigent circumstances.

Lake County Sheriff Dept. Policy T-0002 and T-0011 prohibits Cross Gender pat-down searches of female inmates, except in emergency or exigent circumstances.

Training module “Employees, Prisoners, General Identity Disordered Prisoners and the Public” states that: Pat-down and clothed body searches of female prisoners may only be conducted by female staff members unless an emergency situation exists such that there is not a female staff member available to search and waiting for a female staff member would jeopardize the good order and security. If a male staff member searches a female prisoner, it must be documented through submission of a written report to the on-duty administrator.

The female unit within the LCRRP facility has a minimum of 2 female officer on staff at all times. Additionally, additional female staff can be requested from the Lake County Jail if a circumstance occurred whereas additional female deputies were needed to conduct searches or to allow female inmates access to recreation and programs out of their cells.

- (c) During random staff interviews and random inmate interviews, staff and inmates were aware of what gender could and should not search male and female offenders. Male staff and female inmates both indicated that male staff could not pat/strip search female inmates absent exigent circumstances.

Administration indicated that in exigent circumstances, a female street deputy would be called in from the Lake County Sheriff’s department. Additionally, there were no indications that cross gender male-to-female pat searches have occurred and there were no indication that any cross gender strip searches had occurred.

- (d) 03.03.140 Prohibited Sexual Conduct Involving Prisoners, the PREA Manual, Privacy Notice Signs, Knock and Announce signs were reviewed and observed throughout the tour.

#### 03.03.140 General Information

w. “Knock and announce” areas within the facility include, but are not limited to, bathroom stalls and showers, housing unit cells, health care treatment rooms, and quartermaster area. This includes the intake area.

z. Male staff at the LCRRP facility shall be required to sign the appropriate logbook whenever they enter or exit the female housing unit. Any failure to log in shall be reported immediately to supervisory staff.

#### 03.03.140 Additional Measures to Minimize Prohibited Conduct

**GG.** Female offenders shall be provided one or more locations where they may dress, shower, and use the toilet out of sight of male staff.

**HH.** Whenever an offender is transported to receive medical care, male officers shall not remain in the examination room when the offender is fully or partially nude, except in an emergency situation or upon request of the health care professional who will be conducting the examination. Health care professionals are exempt from this requirement.

The PREA Manual mandates that each “Warden shall ensure the facility’s physical plant layout enables prisoners to shower, perform bodily functions and change clothing without nonmedical staff of the opposite gender viewing the prisoners’ breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks.”

The PREA Manual also requires that cross-gender staff announce their presence when entering the opposite gender housing areas. Specifically, it calls for staff to “Knock on the most interior door and announce in a loud clear voice, ... wait 10 seconds and enter.” This Auditor observed this practice during the tour of the facility. Additionally, Random Staff and Inmate interviews confirmed that staff were announcing their presence when entering opposite-gender housing areas on a routine basis.

Lake County Sheriff Department Policy T-0032 “Knock and Announce” outlines cross-gender announcement in opposite-gender housing and shower areas.

LCRRP Rule-Guidebook 2017 indicates that [offender] must be fully and properly clothed when out of [their] room and during normal business hours.”

During the tour it was noted that many of the male offender rooms had camera coverage directly within the room. The rooms had a chest high barrier around the toilet that blocked staff from viewing offender’s genitalia and buttock in this area. Signs were posted on the barrier that indicated that Offender should change clothing behind this barrier. This Auditor reviewed the cameras and confirmed that cameras were arranged in a way the one could not see the area within the physical barrier.

LCRRP supplied male and female log books with notations where opposite-gender announcements were made at shift change when the status quo changed on the unit.

**(e) Policy 04.04.110 Search and Arrest in Correctional Facilities, General Information**

**K.** Except as outlined in PD 04.06.184 “Gender Identity Disorder (GID)/Gender Dysphoria,” staff shall not search or physically examine a prisoner for the sole purpose of determining the prisoner’s genital status.

Policy 04.06.184 Gender Identity Disorders (GIC)/ Gender Dysphoria, General Information

**E.** Staff shall not physically examine a prisoner for the sole purpose of determining the prisoner’s genital status. If unknown, it may be determined during conversations with the prisoner, by reviewing medical records or, if necessary, as part of a broader medical examination conducted by medical staff in accordance with this policy.

Interviews with Medical Staff, Random Staff Interviews, Administration, and a Transgender Interview indicated that staff does not search a transgender offender solely to determine genital status.

**(f) In-Service Training Modules- Personal Searches: The Application of Search Procedures for GID and Transgender Prisoners**

Computer Based Training Custody and Security in Corrections Part 2- Searches- Exerts submitted have tutorials and picture examples of proper pat search procedures to include the “praying hands technique” and searching the groin area.

Interview with Transgender inmate and Random staff interviews indicated that staff had training regarding professional least intrusive searches of transgender/LGBTI/Intersex inmates. The Transgender interview confirmed that staff were respectful and professional when conducting Transgender searches.

Random Staff Interviews confirmed that staff recognized the appropriate use of the “praying hands technique” when pat searching an individual with breasts.

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

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) 03.03.140 Prohibited Sexual Conduct Involving Prisoners, Additional Measures to Minimize Prohibited Conduct OO. The PREA Administrator shall ensure standardized educational material to educate prisoners regarding conduct prohibited by this policy, self-protection, how to report conduct or threats of conduct prohibited by this policy, and treatment and counseling is accessible to all prisoners. Educational materials shall be available to all prisoners, including any updates, in CFA and Reentry facilities and shall be incorporated into facility orientation programs. If needed, the Department will seek the assistance of interpreters for prisoners with disabilities or limited English proficiency.

The PREA Manual- Prisoners with Disabilities or Limited English Proficiency- The Department will provide PREA prisoner education in formats understandable by the entire prisoner population. If needed, the Department will seek the assistance of interpreters.

LCRRP provided documents to include: Prisoner Guidebook in Spanish, Tri-fold Spanish- Sexual Violence, Spanish Sexual Abuse Posters, Privacy Notice in English/Spanish, PREA Pamphlet in Brail, and flyer for Language Unlimited services that included Language, Deaf, and Hard of Hearing Services.

- (b) Random Interviews with Staff indicated that when an offender is identified as having an impairment that would limit their ability to access the information they would use multiple options to ensure the offender received and understood the materials. This included but not limited to: reading materials to the offender, reading materials to offenders via the Language Unlimited Service, providing them translated materials, or materials in Brail.

During Interviews with Disabled and Limited English Proficient Inmates it was determined that inmates felt comfortable identifying limited reading skills, physical disabilities, and cognitive disabilities to the Deputies and Parole Agents. The interviewees indicated that staff would sit with them, read the materials, and answer questions if necessary to ensure that they could utilize the information. This Auditor interviewed offenders with sight issues, reading deficiencies, and cognitive issues.

- (c) PREA Manual- Prisoners with Disabilities or Limited English Proficiency-

The Department will provide PREA prisoner education in formats understandable by the entire prisoner population. If needed, the Department will seek the assistance of interpreters.

The Department may rely on prisoner interpreters, prisoner readers, or other types of prisoner assistants only in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the prisoner's safety, the performance of first-response duties as outlined in this manual, or the investigation of the prisoner's allegations.

Ransom Staff Interview, Administration Interviews, Disabled and Limited English Proficient Inmate Interviews, and Random Inmate Interviews produced evidence that staff and offenders alike knew that inmate interpreters were not to be used unless exigent circumstances existed. No one indicated that they had ever witnessed, conducted, or requested that an inmate interpret for any investigation. The facility has not had any PREA abuse or harassment allegations.

## 115.17 Hiring and promotion decisions

### Auditor Overall Determination: Audited at Agency Level

#### Auditor Discussion

The Lake County Residential Reentry Program contracts with the Lake County Sheriff's department for their security staff at the MDOC facility.

The PREA Manual- Promoting Current Employees- Contractors

Before enlisting the services of any contractor who may have contact with prisoners, the Department shall perform a criminal background records check.

The Department shall not enlist the services of any contractor, who may have contact with prisoners, 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 in, attempting to engage in, or conspiracy 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 (2).

Incidents of sexual harassment shall be considered in determining whether to enlist the services of anyone who may have contact with prisoners.

LCRRP provided documentation showing the most current LEIN background check for all Lake County Sheriff's Deputies who work onsite at LCRRP. All officers had Clearances conducted in September and October of 2016.

Contractor/Volunteer LEIN checks were all within 5 years except for 1 Volunteer (last 12/2011)

***This Standard was additionally audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issued on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.***

*The employment screening policy 02.06.111 and PREA Manual clearly prohibit hiring and promoting staff who have engaged in the behavior noted within the standard. Corrections Officer job postings, application questions and a promotional application for Sergeant were provided as proof to demonstrate the agency considers these factors for hiring and promotional decisions. The agency Central Office is responsible for conducting the hiring and background screenings of correctional officers.*

*Agency policy 02.06.11 and an application for employment were reviewed. Adequate screening for incidents of sexual harassment are present within the materials. Sample applications for a new hire and promotion were reviewed. Both employment application materials demonstrate consideration of incidents of sexual harassment in the hiring process. Sample applications for a new hire and promotion were reviewed. Both employment application materials demonstrate consideration of incidents of sexual harassment in the hiring process.*

*02.06.111 EMPLOYMENT SCREENING and the PREA Manual establish procedures for hiring. A review of policy and the interview with Human Resource staff confirms that the*

*individual facilities are not responsible for conducting background checks of custody staff. This function is completed at the agency level by central office staff. The agency reports that 474 corrections officers had background checks completed at the agency level. The agency provided a sampling of LEIN check documentation for the past 2 years to demonstrate the agency practice for provision (c).*

*The agency and individual facilities share the role of conducting background checks on contractors who may have contact with inmates. Some contractors are hired through Central Office and their background checks are completed at the agency level, while individual contractors may be screened locally at the facility. According to policy 02.06.111 EMPLOYMENT SCREENING, the PREA Manual and staff interviews, 5-year LEIN checks are completed by the records supervisor in June of designated years for each individual facility where the contractor or employee is located. Documentation was received from two facilities to verify this practice.*

*The agency provided sample applications for hires of new corrections officers and a promotional application to demonstrate that the agency requires all applicants to provide such information when applying for employment or promotion and during any self-evaluations. In addition to application materials, the employee work rules, specified in the employee handbook, requires that employees have an ongoing obligation to disclose any sexual misconduct. There are no self-evaluation procedures in place. Agency policy affirmatively states that material omissions regarding such misconduct or the provision of materially false information are grounds for termination.*

*02.01.140 HUMAN RESOURCE FILES, 02.06.111 EMPLOYMENT SCREENING and the PREA Manual establish procedures for provision (h) of this standard. The agency provided two 6 examples of the agency responding to requests from outside agency requests for such information on former employees. These requests were processed at the agency central office level.*

## **115.18 Upgrades to facilities and technologies**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

The PREA Manual under Facility and Technology Upgrades states:

- (a)** *When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the effect of the design, acquisition, expansion or modification upon the Department's ability to protect prisoners from sexual abuse shall be considered.*
- (b)** *When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the Department's ability to protect prisoners from sexual abuse shall be considered.*

MDOC requires form *CAH-135 Project Review and Approval* to be utilized for all facility projects. Through Administration and PREA Coordinator interviews it was noted that the Facility Supervisor, Lake County Sheriff's Office, and the PREA Administrator would discuss any projects at the facility. Not projects have occurred, nor have any technology upgrades occurred during the Audit review period.

## 115.21 Evidence protocol and forensic medical examinations

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) MDOC curriculum is Crime Scene Management and Preservation. References include United State Army Criminal Investigation Command and Michigan State Police Training Materials.

Interview with MDOC Investigators indicated that their investigation was limited to Administrative investigations. Michigan State Police will conduct any criminal investigation if criminal findings are discovered. The MDOC Inspectors are trained using curriculum Crime Scene Management and Preservation.

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA requires specialized training be provided for employees who may respond, to reported incidents of sexual assaults. This policy requires Crime Scene Management and Evidence collection protocol. The Lake County Sheriff's Office will dispatch Law Enforcement Deputies and Detectives whom will conduct/refer any criminal investigation if criminal findings are discovered.

- (b) The Lake County Sheriff's Detectives are trained during Michigan Police Basic Training using course 110-Michigan Commission on Law Enforcement Standards--Basic Training Curriculum (which included Special Investigation Sexual Assault Investigation) and receive additional training provided online at the PREA Resource Center <https://www.prearesourcecenter.org/file/1969/specialized-training-investigating-sexual-abuse-confinement-settings>
- (c) MDOC PREA Manual and Policy Directive 03.04.100 Health Services section UU. both call for Forensic Examination be conduct by SAFE/SANE nurse examiners if abuse occurred in 96 hours or less, or where forensic evidence may be present. If SAFE/SANE nurse examiner is not available the examination can be performed by another qualified medical practitioner and documentation will be maintained of the Departments efforts to secure a SAFE/SANE examination. The manual and policy both require that the exam shall be without financial cost to the prisoner. NOTE: Emails were supplied that provided proof that LCRRP has tried to secure an MOU for SAFE/SANE services from Spectrum Health Big Rapids Hospital. Per the correspondence responses, the hospital is working on establishing these services in the Emergency Department by the winter of 2017.
- (d) MDOC Letter sent to supporting application for grants submitted by the Michigan Coalition to End Domestic & Sexual Violence and the Detroit Rescue Mission Ministries to aid in obtaining a MOU for services.
- Memo dated November 28, 2016 addressed to all Wardens, directing that administrators reach out to Local Rape Crisis Centers for support. Additionally, requiring all staff to complete the Office of Victims of Crime, Training and Technical Assistance Center Core Competencies and Skills Courses (13 Sections) and Incarcerated Victims of Sexual Violence training (60 minute course).
- (e) MDOC PREA manual provides that as requested by the victims a qualified medical or mental health staff member can accompany and support the victim through the forensic medical exam and investigatory interviews when a Rape-crisis/Community-based advocate is not available.
- (f) Michigan State Police letter dated September 30, 2015 acknowledging compliance with section (a)-e) of this section.

(g) Michigan State Police letter dated September 30, 2015 acknowledging sections a-f apply to their agency.

(h) LCRRP utilizes services provided by Communities Overcoming Violent Encounters (COVE) located in Ludington MI. Interview with the point-of-contact verified that COVE will provide advocates to directly work with victims of sexual abuse. He indicated that there are future plans to work with LCRRP to have onsite services provided in lieu of transportation to the community for victim's advocacy services.

As of the date of the audit, MDOC has also begun working with Rape, Abuse & Incest National Network (RAINN) to provide access to counseling services via telephone conference.

## 115.22 Policies to ensure referrals of allegations for investigations

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

(a) MDOC Policy Directive 01.01.140 Internal Affairs- directs that all allegations of abuse and harassment be referred to the Internal Affairs Division Manager to be assigned for investigation. Additionally, the a Internal Affairs Manager shall also coordinate the investigation of all cases under the jurisdiction of Internal Affairs Division which are referred to the Michigan State Police or local law enforcement agency for criminal investigation.

MDOC Policy Directives 03.03.140 Prohibited Sexual Conduct Involving Prisoners- directs that allegations of sexual assault against staff shall be reported to the Michigan State Police or other appropriate law enforcement agencies for investigation.

MDOC PREA Manual states that "All prisoner-on-prisoner sexual abuse, staff-on-prisoner sexual misconduct and staff-on- sexual harassment allegations ...shall be...investigated."

Administrative interviews, PREA Compliance Manager Interviews, Random Staff Interviews, Inspector interviews, and Random Inmate Interviews did not indicate that there have been any allegation of Sexual Abuse or Sexual Harassment at the facility.

One of the female inmate's interviewed indicated that she "thought the police were at the Facility earlier in the year for a PREA assault allegation." She provided the name of the inmate she felt was involved. This auditor conferred with the Facility Supervisor, Staff Sergeant, and PREA Analyst. In reviewing the documentation regarding the incident that was described and inmate's removal, it was clear that inmate identified was removed from the facility for previous felony warrants and not for any PREA related incident. There are no indication that LCRRP has had any allegations of Sexual Abuse or Sexual Harassment.

(b) MDOC Policy Directives 03.03.140 Prohibited Sexual Conduct Involving Prisoners- directs that allegations of sexual assault against staff shall be reported to the Michigan State Police or other appropriate law enforcement agencies for investigation.

MDOC PREA Manual states that "...staff shall ensure all allegations are referred to the appropriate law enforcement agency...for criminal investigation in conjunction with the Department's administrative investigation. Referrals to law enforcement shall be documented..."  
"...the Department shall ensure that all Sufficient Evidence/Substantiated investigations that appear to be criminal are referred for prosecution."



PREA Policy and Directives are published at <http://www.michigan.gov/corrections/0,4551,7-119-1409---,00.html> under hyperlink Policy Directives  
[http://www.michigan.gov/corrections/0,1607,7-119-1441\\_44369---,00.html](http://www.michigan.gov/corrections/0,1607,7-119-1441_44369---,00.html)

- (c) PREA Policy and Directives are published at <http://www.michigan.gov/corrections/0,4551,7-119-1409---,00.html> under hyperlink Policy Directives  
[http://www.michigan.gov/corrections/0,1607,7-119-1441\\_44369---,00.html](http://www.michigan.gov/corrections/0,1607,7-119-1441_44369---,00.html)

03.03.140 Prohibited Sexual Conduct Involving Prisoner is published and outlines MDOC and Law Enforcement requirements.

01.01.140 Internal Affairs is published and outlines MDOC and Law Enforcement requirements.

Michigan State Police letter dated September 30, 2015 acknowledging compliance with section (a-e) of 115.21.

Michigan State Police letter dated September 30, 2015 acknowledging sections a-f of 115.21 apply to their agency.

Lake County Sheriff Office PREA policy requires specialized training be provided for employees who may respond, to reported incidents of sexual assaults. This policy requires Crime Scene Management and Evidence collection protocol.

- (d) See letter (c)

- (e) N/A

### 115.31 Employee training

#### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) The PREA Manual Training Section- Employee: *All Department employees who may have contact with prisoners shall receive PREA training developed by the Training Division that includes at a minimum the following information:* (the areas outlined address a 1-10 of this section).

LCRRP provided documentation with the training curriculum “PREA Training Module 1 and 2” with the attached training records for MDOC employees.

Lake County Sheriff’s Deputies provided training log for their staff completing online PREA training.

- (b) The PREA Manual Training Section- Employee: *Training shall address gender-specific issues of prisoners housed with the MDOC. The employee shall receive additional training if the employee is reassigned from a facility that houses only male prisoners to a facility housing only female prisoners, or vice versa.*

LCRRP provided gender specific curriculum that is provided to the staff.

- (c) The PREA Manual Training Section- Employee- *The Department shall provide each employee with refresher training every two years to ensure that all employees know the Department’s policies and procedures. In years in which an employee does not receive refresher training, the*

*Department will provide refresher information on current sexual abuse and sexual harassment policies.*

LCRRP and Lake County Sheriff's Office provided rosters for employees. MDOC has an annual In-service Training Module (2hrs) that is part of their annual In-service Training plan.

- (d)** The PREA Manual Training Section-Employee- *The Department shall document through an employee signature or electronic verification that employees receive and understood the training.*

LCRRP and Lake County Sheriff's Office provided training rosters for employees.

Random Staff Interview with MDOC staff and Lake County Sheriff's Deputies indicated that staff had received the training, understood the training, and were implementing the education learned.

### **115.32 Volunteer and contractor training**

#### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a)** The PREA Manual Training Section- Volunteer and Contractor- *The Department shall ensure that all volunteers, contractors and their staff who have contact with prisoners have been trained regarding their responsibilities/obligations under the Department's policies and procedures.*

Lake County Sheriff Dept. Policy T-0036- Zero Tolerance/ PREA- Employee Training: a. *All employees receive instruction related to the prevention, detection, response, reporting and investigation of sexual assault during pre-service training.*

Lake County Sheriff's Deputies are contracted by MDOC to provide onsite security at Lake County Residential Reentry Program.

- (b)** The PREA Manual Training Section- Volunteer and Contractor- *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 prisoners. All volunteers and contractors who have contact with prisoners shall be notified of the Department's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.*

- (c)** MDOC provided rosters for their Contract Employees.

LCRRP and Lake County Sheriff's Office provided training rosters for employees.

Random Staff Interview with Lake County Sheriff's Deputies and the treatment contractor interviewed indicated that they had received the training, understood the training, and were implementing the education learned.

## 115.33 Inmate education

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

(a) Policies 03.03.140, 04.01.105, 04.01.140 and the PREA Manual, which were reviewed by this auditors, address the standard's requirements to train inmates during the intake process regarding the agency's zero-tolerance policy, how to report sexual abuse and sexual harassment, as well as available services. Through interviews with facility intake staff the PREA Coordinator and random inmates, this education is reportedly completed through a video based presentation that is accompanied by a brochure that specifically covers the zero- tolerance policy, the definitions of sexual abuse, sexual harassment, retaliation, how to report sexual abuse, the process following a report, available services to victims and how to avoid sexual abuse.

(b) LCRRP provided sample documents showing that inmates received PREA education in the form of a pamphlet and Video PREA training “taking action.”

Random Inmate and Staff interviews indicated that inmates were provided PREA materials and trained regularly within 24hrs of reception to the Program.

(c) LCRRP provided sample documents showing that inmates received PREA education in the form of a pamphlet and Video PREA training “taking action.”

Random Inmate and Staff interviews indicated that inmates were provided PREA materials and trained regularly within 24hrs of reception to the Program.

(d) Random Interviews with Staff indicated that when an offender is identified as having an impairment that would limit their ability to access the information they would use multiple options to ensure the offender received and understood the materials. This included but not limited to: reading materials to the offender, reading materials to offenders via the Language Unlimited Service, providing them translated materials, or materials in Brail.

During Interviews with Disabled and Limited English Proficient Inmates it was determined that inmates felt comfortable identifying limited reading skills, physical disabilities, and cognitive disabilities to the Deputies and Parole Agents. The interviewees indicated that staff would sit with them, read the materials, and answer questions if necessary to ensure that they could utilize the information. This Auditor interviewed offenders with sight issues, reading deficiencies, and cognitive issues.

(e) LCRRP provided example documentation in the form of Orientation notes from Parole Agents and form CAJ-1036 Prison Rape Elimination Act (PREA) Prisoner Education Verification.

(f) LCRRP provided examples of postings, memo's, brochures, and the “An End to Silence Inmates Handbook 3<sup>rd</sup> Edition.”

Additionally, during the tour this Auditor observed PREA Posters with Sexual abuse hotline numbers for Inmates and Non-Inmates. These posters were in both English and Spanish throughout the facility and housing units.

## 115.34 Specialized training: Investigations

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) The PREA Manual Training Section- Specialized Training-Investigator: *In addition to the general PREA training provided to all employees, Department investigators are required to receive specialized training from the Training Division to be able to conduct sexual abuse investigations in confinement settings.*
- (b) The PREA Manual Training Section- Specialized Training-Investigator: *Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.*

MDOC curriculum is Crime Scene Management and Preservation. References include United State Army Criminal Investigation Command and Michigan State Police Training Materials.

The MDOC protocol, which is outlined in the PREA Manual and Crime Scene Management and Preservation training manual, demonstrates that agency and facility have procedures in place for preserving evidence and maintaining the integrity of any crime scene. These procedures allow for the criminal investigative agency, Lake County Sheriff's Deputies as First Responders, Lake County Sheriff's Detectives as investigators and Michigan State Police (MSP) for additional support (needed), to maximize the collection of available evidence within the crime scene.

Interview with MDOC Inspector indicated that they were trained and that the investigation was limited to Administrative investigations. The Lake County Sheriff's Office or the Michigan State Police will conduct any criminal investigation if criminal findings are discovered. The MDOC Inspectors are trained using curriculum Crime Scene Management and Preservation.

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA requires specialized training be provided for employees who may respond, to reported incidents of sexual assaults. This policy requires Crime Scene Management and Evidence collection protocol.

Interview with Lake County Sheriff's Staff Sergeant indicated that their Corrections Deputy staff investigation was limited to first responder duties. The Lake County Sheriff's Office will dispatch Lake County Sheriff Law Enforcement Deputies, and Detectives, whom will conduct any criminal investigation if criminal findings are discovered. The Lake County Sheriff's Detectives are trained during Michigan Police Basic Training using course 110-Michigan Commission on Law Enforcement Standards--Basic Training Curriculum (which included Special Investigation Sexual Assault Investigation) and receive additional training provided online at the PREA Resource Center <https://www.prearesourcecenter.org/file/1969/specialized-training-investigating-sexual-abuse-confinement-settings>

The Lake County Sheriff's Detectives are trained during Michigan Police Basic Training using course 110-Michigan Commission on Law Enforcement Standards--Basic Training Curriculum (which included Special Investigation Sexual Assault Investigation) and receive additional training provided online at the PREA Resource Center <https://www.prearesourcecenter.org/file/1969/specialized-training-investigating-sexual-abuse-confinement-settings>

- (c) MDOC provided training roster and certificates for their Inspectors.

Lake County Sheriff Department provided rosters for their Detectives.

- (d) The Lake County Sheriff's Department conduct the criminal investigation and will seek assistance from the Michigan State Police if necessary.

### 115.35 Specialized training: Medical and mental health care

#### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) Agency policies 02.05.100 and 02.05.101 establishes procedures for ensuring staff, including contract staff, are adequately trained based on their positions within the agency.

The agency has developed a training curricula specific to medical and mental health staff: PREA Health Care Staff Module and PREA Qualified Mental Health Training Module. Training materials cover the detection of sexual abuse and harassment, preservation of evidence specific to facility responsibility (forensic examinations are conducted at an outside medical provider and no evidence is collected by medical or mental health practitioners), how to respond to victims of sexual abuse and harassment and facility reporting responsibilities for allegations of sexual abuse and harassment.

- (b) Neither the facility nor its staff conduct forensic examinations, therefore, training records consistent with provision (b) of the standard are not required.

- (c) During the interview with the contracted medical provider it was discovered that PREA Health Care Staff Module was not completed. LCRRP needs to supply proof that the training has been conducted. The Medical Contractors had received the PREA Policy and signed acknowledgment.

There are no Lake County Sheriff medical/mental health employees, MDOC medical/mental health employees, nor are there any contracted Mental Health personnel onsite. Mental health services are not conducted onsite, offenders are taken to the community if needed.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

- (d) The agency has developed a training curricula specific to medical and mental health staff that includes and expands upon the basic training module 2 to cover the key points required by the standards. Contractors must complete the traditional module 1 and 2 training required of all employees as part of accessing this expanded training specific to each discipline. The auditor's review of these training materials and corresponding completion records demonstrates compliance with provision (d) of the standard.

## 115.41 Screening for risk of victimization and abusiveness

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *In addition to the PREA assessment at intake, Staff shall complete a PREA-Aggressor Risk Assessment-Prison review and PREA-Victim Risk Assessment-Prison review whenever warranted. This includes any time a prisoner is referred for an assessment, at the request of the prisoner or staff, an incident of sexual abuse has occurred or alleged to have occurred, or upon receipt of additional information that bears on the prisoner's risk of being sexually abused or being sexually abusive toward others. If any incident requires the transfer of a prisoner, the sending facility shall ensure the risk assessment(s) is completed prior to the transfer.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews- *All prisoners shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners. The OMNI-based risk assessment tools will be used to determine a prisoner's risk. The results of the Risk Assessment shall be considered when making housing, bed, work, education, and program assignments with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive.*

LCRRP provided risk Assessment Verifications that the assessments were being conducted in compliance with the standard.

Random Staff and Inmate interviews indicated that the Risk Assessment was conducted on the date of reception by a trained Deputy.

- (b) The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews: - *Staff designated by the warden shall complete both PREA Risk Assessments if any of the following occur:*
- (1) *Within 72 hours of the prisoner's arrival at a correctional facility, including intake.*

LCRRP provided risk Assessment Verifications that the assessments were being conducted in compliance with the standard.

Random Staff and Inmate interviews indicated that the Risk Assessment was conducted on the date of reception by a trained Deputy.

- (c) The PREA Risk Assessment Worksheet CAJ-1023 meets objective criteria. The assessment is an objective set of instruments that measures both an inmate's risk of victimization and risk for predatory behavior. The tool generates a numerical score based on weighted factors to determine an inmate's classification as either an Aggressor, Potential Aggressor, No Score, Potential Victim or Victim.
- (d) The review of the PREA Manual and the PREA Risk Assessment Manual, as well as through a discussion with the agency PREA Coordinator, the auditor is satisfied that the intake screening instrument meets the 9 criteria. Number 10 is not applicable as the Lake County Residential Reentry Program does not detain offenders solely for civil immigration purposes.

- (e)** The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews: *The assessment shall be completed using information contained in the prisoner's file, electronic databases available to staff, and/or in discussion with the prisoner.*

The review of the Assessment tool, coupled with interviews with staff that conduct the initial screening, the process and tool do consider the criteria set in this standard.

- (f)** LCRRP provided a memo that defined the period for reassessment for 15-30 days from the parolees' arrival to the LCRRP.

Interviews with the Staff who conduct the review and Random Inmates, coupled with a review a documentation, showed that the provisions of this standard are being met.

LCRRP provided risk Assessment Verifications that the assessments were being conducted in compliance with the standard.

Random Staff and Inmate interviews indicated that the Risk Assessment was conducted in a period of time not to exceed 30 days.

- (g)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: O. *In addition to the PREA assessment at intake, Staff shall complete a PREA-Aggressor Risk Assessment-Prison review and PREA-Victim Risk Assessment-Prison review whenever warranted. This includes any time a prisoner is referred for an assessment, at the request of the prisoner or staff, an incident of sexual abuse has occurred or alleged to have occurred, or upon receipt of additional information that bears on the prisoner's risk of being sexually abused or being sexually abusive toward others. If any incident requires the transfer of a prisoner, the sending facility shall ensure the risk assessment(s) is completed prior to the transfer.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews- Facilities: *Staff shall complete a new PREA-Aggressor Risk Assessment-Prison and PREA-Victim Risk Assessment-Prison form when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the prisoner's risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners. If any such incident requires that the prisoner be transferred, the sending facility shall ensure that the risk reassessments are completed prior to the transfer.*

Interviews with Ransom Staff, Inmates, and Administration concluded that there were no reported incidents whereas additional assessments were required.

- (h)** The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews: *Prisoners may not be disciplined for refusing to answer or not disclosing complete information in response to questions relating to mental, physical, or developmental disabilities, whether they are, or are perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous victimization, or their own perception of vulnerability.*

During Random Inmate Interviews, Administration, and Interviews with Staff who conduct the Initial and Review it was determined that no inmate was punished for not answering questions related to this section.

- (i)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions- Confidentiality of Reports and Investigations: U. *Reasonable steps shall be taken to ensure the confidentiality of information obtained during the risk assessment process and from reports of conduct prohibited*

*by this policy and any resulting investigations. Persons interviewed as part of an investigation shall be specifically warned not to discuss the investigation with others. Staff that intentionally compromise this confidentiality shall be subject to discipline in accordance with PD 02.03.100 "Employee Discipline," prisoners in a CFA facility who intentionally compromise this confidentiality shall be subject to discipline in accordance with PD 03.03.105 "Prisoner Discipline." This does not preclude staff from discussing such matters with their attorneys or in accordance with this or any other policy directive, Civil Service Commission rules and regulations, or applicable collective bargaining unit agreements. This also does not preclude prisoners from discussing such matters with their attorneys, to seek treatment, or to ensure their own safety. The PREA Administrator shall share with the facility head and his/her supervisors, as appropriate, allegations of conduct prohibited by this policy which are received directly by the PREA Section.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews: *Information obtained during the risk assessment process shall be treated as confidential information and only shared with designated staff in accordance with Department policy. Risk assessment information shall not be shared with prisoners.*

During Interview with the Staff that conduct the Initial and Reviews it was determined that the answers to the Assessment were not secured in a location that would protect the information from being exploited to the inmate's detriment by staff or other inmates. Administration was going to rectify this immediately and provide the new direction to staff and the location of storage.

On 6/30/2017 LCRRP provided documentation that all PREA Risk Assessments, and Reviews are being stored electronically and only retroactively accessible to the Facility Supervisor. Screenshots of the electronic system were provided as well as the scanned Risk Assessments that are being stored.

## **115.42 Use of screening information**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) PD 05.01.140 Prisoner Placement and Transfer- PREA Risk Assessment: CC. ... *Staff shall complete the PREA Risk Assessments Worksheet (CAJ-1023) in accordance with the PREA Risk Assessment Manual. The assessment shall be completed using information contained within the prisoner's Records Office file, on electronic databases available to staff and obtained from discussions with the prisoner. This assessment shall be considered when making housing, bed, work, education and program assignments at that facility. Risk assessment scores affecting bed assignments shall follow the procedures outlined in the PREA Manual.*

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- VII. Screening/ Assessment at Receiving: b. *Once an offender is identified as a High Risk Predator (HRSP) or a victim/potential victim any time during his/her incarceration, the offender is re-evaluated for appropriate housing and programs.*

- (b) LCRRP has a Memo dated March 9, 2017 that, *"Individual consideration is given to LGTBI/high risk offenders with regard to housing and work assignments. Administrative staff speaks with the offender regarding any concerns. If necessary, LCRRP has the means to provide LGTBI/high risk offenders with single cell living arrangements.*



*Furthermore, outside of formal count times LGTBI/high risk offenders are allowed to shower separately at will. Offenders who are provided single cell living arrangements are provided the same opportunities as any other offender at the facility.*

PD 05.01.140 Prisoner Placement and Transfer- PREA Risk Assessment: EE. *Whenever a prisoner is subject to imminent risk of sexual abuse or is the alleged victim of sexual abuse, the facility shall take immediate action to protect the prisoner by preventing contact between the alleged abuser and alleged victim. Action to protect the prisoner may include, but is not limited to, changes in housing units and/or assignments, transfers, and stop orders.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews: **Decisions Based on PREA Risk Assessment Results** - *In addition to other classification considerations, facility staff shall use information from the risk assessment to inform housing, bed, work, education and program assignments with the goal of keeping prisoners at high risk of being sexually victimized separate from prisoners at high risk of being sexually abusive.*

*These decisions shall include individualized determinations addressing how to ensure the safety of each prisoner. Risk assessment scores will affect bed assignments as follows:*

- *(V) or (PV) shall be placed in the same cell, pod or room with a (V), (PV) or (NS).*
- *(A) or (PA) shall be placed in the same cell, pod or room with an (A), (PA) or (NS).*
- *(NS) may be placed in the same cell, pod or room with any score.*

Interview with the Deputies that are responsible for completing the Initial Risk assessment, and the Parole Agents responsible for Reviews, determined that the scores are utilized to determine the most appropriate safety measure that should be taken for each offender.

- (c) PD 04.06.184 Gender Identity Disorder (GID)/ Gender Dysphoria- General Information: *D. When making housing and programming assignments, facility staff shall consider on a case-by-case basis whether a placement would compromise the prisoner's health and safety and any management or security concerns.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews- Transgender, Intersex, and Gender Identity Disorders (GID): *In deciding whether to assign a transgender, intersex or GID prisoner to a facility for male or female prisoners, and in making other housing and programming assignments, facility staff shall consider on a case-by-case basis whether a placement would compromise the prisoner's health and safety and whether the placement would present management or security problems to the MDOC. This placement is determined pursuant to PD 04.06.184 "Gender Identity Disorders in Prisoners."*

Interviews with the Deputies that conduct the Initial Risk assessment and the PREA Coordinator determined that Transgender inmates are further assessed to determine the most appropriate placement.

Interview the Transgender inmate indicated that he met with the Security and the PREA Coordinator and discussed the most appropriate placement and cell assignment for her during her time at the facility.

- (d) PD 04.06.184 Gender Identity Disorder (GID)/ Gender Dysphoria- General Information: *J. The prisoner shall be assessed by an appropriate medical provider at least twice a year to determine if any changes are needed to the approved individual management plan.*

Interviews with Administration and Random Inmates confirmed that the length of stay at LCRRP is not to exceed 90 days. No Transgender offender would be in their custody to be evaluated in the timeline set in the standard.

- (e) The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews- Transgender, Intersex, and Gender Identity Disorders (GID): *A transgender, intersex or GID prisoner's own views with respect to his or her own safety shall be given serious consideration in placement decisions.*

LCRRP provide a Memo that directs: *Individual consideration is given to LGTBI/high risk offenders with regard to housing and work assignments. Administrative staff speaks with the offender regarding any concerns. If necessary, LCRRP has the means to provide LGTBI/high risk offenders with single cell living arrangements. Furthermore, outside of formal count times LGTBI/high risk offenders are allowed to shower separately at will. Offenders who are provided single cell living arrangements are provided the same opportunities as any other offender at the facility.*

Interview the Transgender inmate indicated that he met with the Security and the PREA Coordinator and discussed the most appropriate placement and cell assignment for her during her time at the facility.

- (f) PD 04.06.184 Gender Identity Disorder (GID)/ Gender Dysphoria- Individual Management Plan and Placement: *H. 2. Access to toilet and shower facilities with relative privacy.*

LCRRP provide a Memo that directs: *Individual consideration is given to LGTBI/high risk offenders with regard to housing and work assignments. Administrative staff speaks with the offender regarding any concerns. If necessary, LCRRP has the means to provide LGTBI/high risk offenders with single cell living arrangements. Furthermore, outside of formal count times LGTBI/high risk offenders are allowed to shower separately at will. Offenders who are provided single cell living arrangements are provided the same opportunities as any other offender at the facility.*

Interview with the PREA Coordinator indicated that Transgender offenders could use the shower and toilet in privacy.

Interview the Transgender inmate confirmed that she is permitted to shower and use the toilet in privacy.

- (g) PD 05.01.140 Prisoner Placement and Transfer- Other Considerations: *II. Information about a prisoner's sexual orientation that is unrelated to the prisoner's behavior shall not be used by staff for any purpose, including placement and transfer decisions.*

The PREA Manual- PREA Risk Assessments and Risk Assessments Reviews- Transgender, Intersex, and Gender Identity Disorders (GID): *Prisoners shall not be placed in dedicated facilities, units or wings solely on the basis of sexual orientation or gender identity status unless such placement is for the safety and security of the prisoner, is in a dedicated facility, unit or wing established in connection with a consent decree, legal settlement or court order.*

Interview with the Transgender inmate, and a tour of the facility, found that she was placed in a cell close to the officer's station in an area with other inmates with high vulnerability to any victimization (non-sexual orientation related). The inmate indicated that this housing was

determined during the meeting with Security and the PREA Coordinator and she was allowed input into her safety.

### **115.43 Protective Custody**

**Auditor Overall Determination: Not Applicable**

#### **Auditor Discussion**

- (a)** Interview with Administration, PREA Coordinator, PREA Analyst, Random Staff, and Random Inmates determined that LCRRP does not have Protective housing in the form of Administrative Segregation.
- (b)** During the tour and interview with staff and inmates, it was determined that Inmates that are at high risk for any kind of victimization are housed in single cells closest to the officer's station. These cell locations do not remove the inmate from the population nor restrict movement or program access.
- (c)** N/A
- (d)** N/A
- (e)** N/A

### **115.51 Inmate reporting**

**Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a)** Policy 03.03.140, the PREA Manual, Prisoner Guidebook, Sexual Abuse Poster (advertising the sexual abuse hot-line) and the PREA brochure were reviewed by the auditor in determining compliance with provision. All provide information to advise inmates of reporting options. The agency permits PREA allegations to be reported verbally to staff, reported via message to the PREA hot-line, in writing via grievance, in writing to the

Correctional Legislative Ombudsman, in writing via the kite system and directly to the Michigan State Police.

During the facility tour it this auditor took note that there were adequate posting in all common areas, housing units, near phone banks, and on bulletin board throughout all areas. Offenders interviewed indicated that they had received the information in the form of brochures and noted receiving direction on where to find the information throughout the facility. Most interviewees indicated that they felt comfortable going to the staff directly and using the Kite system to report any unwanted behaviors toward them or others.

- (b)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *W. Prisoners may report allegations of conduct prohibited by this policy, including threats of such conduct and retaliation for reporting such conduct, ...through the Legislative Corrections Ombudsman.*

The PREA Manual- Reporting and Recording Sexual Abuse and Sexual Harassment Allegations: *Prisoners may report sexual abuse or sexual harassment to the Michigan Legislative Corrections Ombudsman's Office. Upon receipt of a complaint, the Ombudsman's Office shall immediately forward the complaint in writing to the Department PREA Manager on the Prison Rape*

*Elimination Act (PREA): Sexual Abuse/Harassment Referral form. The prisoner may remain anonymous upon request. The Department PREA Manager shall ensure that an investigation into the allegation, if not already completed, is initiated.*

LCRRP provided a copy of the MOU between MDOC and The Legislative Corrections Ombudsman signed in 12/2014.

- (c)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *W. Prisoners may report allegations of conduct prohibited by this policy, including threats of such conduct and retaliation for reporting such conduct, ... . If reported verbally to an employee, the employee shall document it in writing as soon as possible and report it to appropriate supervisory staff.*

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- VIII. Reporting of and First Response to Sexual Assaults Screening- a. Initial Report and Separation: 2. *Anyone that receives a report of an alleged sexual assault, whether verbally or in writing immediately notifies the supervisor and completes an "Incident Report."*

Interviews with staff and offenders indicated that staff would accept complaints verbally, in writing, anonymously, and from third parties. Staff interviews indicated that staff would prefer identification and in writing. They were all aware that this was not required and they must still record, respond, and act for anonymous and verbal complaints. A few staff members articulated that they would still require the offender must also put the verbal report in writing. The Administration issued a memo to all staff reiterating PD 03.03.140 that indicates that the staff can/should accept a verbal report without mandating it be put in writing.

Offenders indicated that if they wanted to report anonymously they could "drop a Kite" without a name on it and/or tell their families to call the facility anonymously. Nearly all of the offenders interviewed indicated that they felt comfortable reporting complaints to staff utilizing all of the means of reporting.

- (d)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Reporting Prohibited Conduct: *V. Staff shall immediately report any knowledge, suspicion or information regarding allegations of conduct prohibited by this policy to appropriate supervisory staff. Reports shall be taken regardless of when the incident was alleged to have occurred. Reports may be made privately to appropriate supervisory staff, through the MDOC Sexual Abuse Hotline, by completing a Department Sexual Abuse/Sexual Harassment Complaint form on the MDOC website or by contacting the Department's Internal Affairs Division.*

The PREA Manual- Reporting and Recording Sexual Abuse and Sexual Harassment Allegations- Staff Reporting: *In accordance with PD 03.03.140 "Prohibited Sexual Conduct Involving Prisoners" and the Department Employee Handbook, staff are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred involving a prisoner under the jurisdiction of the Department including third party and anonymous complaints. ... These reports may be made privately to the appropriate supervisory staff or through the MDOC Sexual Abuse Hotline or by completing a Department Sexual Abuse/Sexual Harassment Complaint form on the MDOC website. The MDOC Sexual Abuse Hotline and website Complaint form are available to staff, the public and third party complainants.*

Random Staff interviews indicated that staff were aware that they could use the PREA hotline, contact their internal affairs office, or report privately to the PREA Coordinator.

## 115.52 Exhaustion of administrative remedies

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) The agency utilizes administrative procedures to address sexual abuse and is not exempt as specified in provision (a) of the standard.
- (b) DIRECTOR'S OFFICE MEMORANDUM 2016 – 29, dated April 27, 2016, which was reviewed by the auditor in determining compliance with provision (b), allows for an inmate's grievance to be submitted at any time to the facility PREA Coordinator or Inspector. Inmates are not required to informally resolve the alleged incident prior to filing a PREA grievance. The PREA grievance will address the elements of the grievance dealing with sexual abuse; however, will require the inmate to resubmit non-PREA related items in accordance with policy 03.02.130 Prisoner/Parolee Grievances. The auditor notes that the Director's Office Memorandum was issued to supplement existing grievance policy 03.02.130 which has not been updated to contain language consistent with provision (b) of the standard.
- (c) DIRECTOR'S OFFICE MEMORANDUM 2016 – 29, dated April 27, 2016, which was reviewed by the auditor in determining compliance with provision (c), allows for an inmate's grievance to be submitted to the facility PREA Coordinator or the facility Inspector. The DOM specifies that the grievances will not be referred to the staff member subject to the complaint within. The prisoner guidebook and the grievance policy (03.02.130) do not contain language specific to provision (c) of the standard. The DOM supersedes these documents and establishes procedure until said policies can be revised or updated to reflect standard requirements.

Grievances may also be submitted in locked boxes throughout the facility. During the tour of the facility there were numerous Grievance lock boxes identified in housing units and common areas.

- (d) DIRECTOR'S OFFICE MEMORANDUM 2016 – 29, dated April 27, 2016, which was reviewed by the auditor in determining compliance with provision (d), states the PREA coordinator or inspector shall ensure a written response is provided to the prisoner within 60 calendar days of receipt of the Step I PREA grievance unless an extension has been approved by the Internal Affairs Division in order to conduct an appropriate investigation. An extension of up to 70 calendar days may be approved by Internal Affairs if 60 calendar days is insufficient to make an appropriate decision. The prisoner shall be informed in writing of any extension and provided a date by which a decision will be made. If no response was received, the prisoner shall submit the appeal within 10 calendar days after the date the response was due, including any extension. A final agency determination on the merits of a PREA grievance shall be provided by the PREA Administrator within 90 calendar days from the original filing of the grievance. Computation of the 90 days does not include the 10 days allowed for the prisoner to file an administrative appeal.
- (e) The DOM, which was reviewed by the auditor in determining compliance with provision (e) of the standard, permits that third parties, including fellow prisoners, staff members, family members, attorneys, and outside advocates, may file a PREA grievance on behalf of a prisoner. A third party may also assist a prisoner in filing the prisoner's PREA grievance in accordance with policy. If a third party files a PREA grievance on behalf of a prisoner, the prisoner must sign the PREA grievance in the area provided indicating the prisoner authorizes the grievance to be filed on his/her behalf for the grievance to be processed. If the prisoner refuses to sign, the PREA grievance shall be immediately dismissed. All Department responses to a PREA grievance filed by a third party will be provided only to the prisoner on whose behalf the grievance was filed. PREA grievance form CAJ-1038A has a section to identify if the grievance is submitted via third

party and if the victim consents to the filing of the grievance on their behalf. If consent is not given, the grievance is denied and documented.

- (f) On the PAQ, the facility claims that no emergency grievances have been filed by an inmate during the audit review period. The DOM, which was reviewed by the auditor in determining compliance with provision (f), establishes procedure for the processing of any emergency grievance in accordance with the standards requirements. The DOM states a prisoner or a third party may file an emergency PREA grievance if s/he believes that the prisoner is subject to substantial risk of imminent sexual abuse. The Prison Rape Elimination Act (PREA) Prisoner Grievance Form (STEP I) (CAJ-1038A) must clearly indicate that the grievance is an emergency PREA grievance and the nature of the risk. Upon receipt of an emergency PREA grievance, the receiving staff member shall immediately forward the emergency PREA grievance, or any portion of the emergency PREA grievance that alleges the substantial risk of imminent sexual abuse, to the warden. The warden shall take immediate action to remove the prisoner from any identified real or potential harm and ensure an initial response is provided to the prisoner within 48 hours. A final agency decision from the PREA Administrator regarding whether the prisoner is in substantial risk of imminent sexual abuse shall be provided to the prisoner within five calendar days. The initial response and final agency decision shall document the agency's determination of whether the prisoner was in substantial risk of imminent sexual abuse and the action taken in response to the emergency PREA grievance.

Through the PAQ and interviews with the facility PREA Coordinator, the facility claims that no emergency grievances have been filed by an inmate during the audit review period. The DOM establishes procedure for the processing of any emergency grievance in accordance with the requirements of provision (f) of the standard to satisfy this auditor's determination of compliance.

- (g) The DOM, which was reviewed by this auditor in determining compliance with provision (g), directs that staff shall not retaliate against a prisoner for using the PREA grievance process. If a prisoner intentionally files a PREA grievance which is investigated and determined to be unfounded and which, if proven true, may have caused an employee or a prisoner to be disciplined or an employee to receive corrective action, the prisoner may be issued a misconduct report if approved by the warden.

Random Staff, Random Inmate, and PREA Coordinator interviews did not disclose that there were any PREA related grievances filed at LCRRP. Inmates did indicate that they felt comfortable filing grievances in general at the facility absent retaliation.

This auditor is satisfied that the Statewide PREA Policy and Procedures are being adhered to at LCRRP.

### **115.53 Inmate access to outside confidential support services**

#### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) LCRRP provided examples of postings, memo's, brochures, and the "An End to Silence Inmates Handbook 3<sup>rd</sup> Edition." This handbook provides the address for Michigan Coalition to End Domestic and Sexual Violence.

LCRRP utilizes services provided by Communities Overcoming Violent Encounters (COVE) located in Ludington MI. Interview with the point-of-contact verified that COVE will provide advocates to directly work with victims of sexual abuse. He indicated that there are future plans

to work with LCRRP to have onsite services provided in lieu of transportation to the community for victim's advocacy services.

As of the date of the audit, MDOC has also begun working with Rape, Abuse & Incest National Network (RAINN) to provide access to counseling services via telephone conference.

Additionally, during the tour this Auditor observed PREA Posters with Sexual abuse hotline numbers for Inmates and Non-Inmates. These posters were in both English and Spanish throughout the facility and housing units.

During Random Staff and Offender Interviews it was noted that offenders come from different parts of the state. Offenders and Staff indicated that there was a continuous dialogue whereas the Parole Agents would research and provide additional information to offenders regarding confidential services in their community of origin to aid in continuity of care when they return home.

- (b)** PD 05.03.118 Prisoner Mail outlines the extent to which incoming and outgoing mail is monitored by the facility.

PD 05.03.130 Prisoner Telephone Use outlines the extent to which telephone calls are monitored.

*M. A prisoner who wants to use the prisoner designated telephones must first complete and sign a Telephone Agreement and Number List - Monitor and Record form (CAJ-370) identifying the names and telephone numbers of people and/or organizations s/he wants to be able to call.*

Michigan Department of Corrections Prisoner Guidebook- Telephone Use: *Prisoner telephone call may be listened to and recorded in accordance with the requirements of Policy Directive 05.03.130 "Prisoner Telephone Use."*

- (c)** Memo dated November 28, 2016 addressed to all Wardens, directing that administrators reach out to Local Rape Crisis Centers for support. Additionally, requiring all staff to complete the Office of Victims of Crime, Training and Technical Assistance Center Core Competencies and Skills Courses (13 Sections) and Incarcerated Victims of Sexual Violence training (60 minute course).

Memo dated November 28, 2016 addressed to all Wardens, directing that administrators reach out to Local Rape Crisis Centers for support. Additionally, requiring all staff to complete the Office of Victims of Crime, Training and Technical Assistance Center Core Competencies and Skills Courses (13 Sections) and Incarcerated Victims of Sexual Violence training (60 minute course).

LCRRP utilizes services provided by Communities Overcoming Violent Encounters (COVE) located in Ludington MI. Interview with the point-of-contact verified that COVE will provide advocates to directly work with victims of sexual abuse. He indicated that there are future plans to work with LCRRP to have onsite services provided in lieu of transportation to the community for victim's advocacy services.

As of the date of the audit, MDOC has also begun working with Rape, Abuse & Incest National Network (RAINN) to provide access to counseling services via telephone conference.

## 115.54 Third-party reporting

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

Through a review of Director's Office Memorandum 2016-29 (regarding prisoner PREA related grievances), the Ombudsman MOU, the Sexual Abuse reporting poster, the online reporting form and an example of a facility email documenting receipt and action on a 3rd party report; the auditor is satisfied that the agency and the facility permit third party reports of sexual abuse and sexual harassment via all methods that are accessible to an inmate directly reporting sexual abuse and sexual harassment, with the additional option of utilizing the agency's website to make a report. Third parties may use the internal kite system, call the reporting hot-line, contact the Legislative Ombudsman, access the agency's on-line reporting form, contact facility staff directly and file PREA grievances. Based on a review of the aforementioned, compliance with provision (a) of the standard was determined.

## 115.61 Staff and agency reporting duties

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Reporting Prohibited Conduct letters T., and V. though CC. outline requirements for all staff to immediately report knowledge, suspicion, or information regarding sexual abuse or harassment. Additionally, there are provision against retaliation and how to report retaliation.

The PREA Manual- Staff Reporting: *In accordance with PD 03.03.140 "Prohibited Sexual Conduct Involving Prisoners" and the Department Employee Handbook, staff are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred involving a prisoner under the jurisdiction of the Department including third party and anonymous complaints.*

State of Michigan, The Department of Corrections Employee Handbook outlines employee reporting requirements.

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- III. Duties and Responsibilities: *a. Employees- Employees are responsible for: 2. immediately reporting any known or suspected act or allegation of sexual assault or retaliation to the appropriate chain of command; and 3. Providing complete cooperation and full disclosure during any inquiry or investigation into an alleged act of sexual assault or retaliation.*

Random Interview with Staff and Administration indicated that staff were aware that they must report any level of suspicion, or information, regarding sexual abuse or harassment of offenders.

- (b) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Confidentiality of Reports and Investigations: *U. Reasonable steps shall be taken to ensure the confidentiality of information obtained during the risk assessment process and from reports of conduct prohibited by this policy and any resulting investigations. Persons interviewed as part of an investigation shall be specifically warned not to discuss the investigation with others. Staff that intentionally compromise this confidentiality shall be subject to discipline in accordance with PD 02.03.100 "Employee Discipline," prisoners in a CFA facility who*



*intentionally compromise this confidentiality shall be subject to discipline in accordance with PD 03.03.105 "Prisoner Discipline." This does not preclude staff from discussing such matters with their attorneys or in accordance with this or any other policy directive, Civil Service Commission rules and regulations, or applicable collective bargaining unit agreements. This also does not preclude prisoners from discussing such matters with their attorneys, to seek treatment, or to ensure their own safety. The PREA Administrator shall share with the facility head and his/her supervisors, as appropriate, allegations of conduct prohibited by this policy which are received directly by the PREA Section.*

*The PREA Manual- Staff Reporting: Information related to a sexual abuse allegations shall not be revealed to anyone other than to the extent necessary for treatment, investigation or other security and management decisions.*

*Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- XIII. Confidentiality: All cases associated with claims of sexual assault, ..., All investigative files are considered confidential information.*

Random interviews with Staff and Administration indicated that all were aware of the sensitivity of sexual abuse/harassment information and requirements to maintain confidentiality regarding reports/information received. Staff also indicated that they were aware that the information was not to be shared amongst other staff members unless there was a specific need to know that was approved by a supervisor.

- (c)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *BB. Employees who are Health Care and Mental Health practitioners are required to report allegations of sexual abuse that occurred in an institutional setting, whether or not the institution is part of the department. The practitioner shall inform the prisoner of the practitioner's duty to report and that confidentiality is limited.*

Interview with the medical contract employee indicated that she was aware of that she had a requirement to report and would advise the offender of this requirement.

- (d)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *CC. The facility shall report any allegations of alleged victims under the age of 18 or who are considered a vulnerable adult under a state or local vulnerable persons statute to the PREA Administrator. After the PREA Administrator receives the reported allegations, s/he will forward the allegations to the appropriate agencies.*

Agency policy 05.01.140, Prisoner Placement and Transfer, outlines that agency's approach to housing youthful inmates and were reviewed in determining compliance. Agency policy dictates that male youthful inmates are housed at the Thumb Correctional Facility (TCF) and female youthful inmates are housed at Women's Huron Valley Correctional Facility (WHV). If a youthful inmate must be placed at another facility for the purposes of medical or mental health care, the placement must be approved by an agency Deputy Director and accommodations for sight, sound and physical contact separation must be made.

During the audit tour, and through interviews with the Facility Supervisor, Lake County Sheriff's Staff Sergeant, and PREA Coordinator, it was observed that LCRRP does not house youthful offenders and is therefore compliant with provisions (a) (b) and (c) of the standard.

- (e) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Investigation of Allegations of Prohibited Conduct requires the facility to report any allegations of sexual abuse, harassment, including third party and anonymous reports to investigators.

The PREA Manual- Staff Reporting: *In accordance with PD 03.03.140 “Prohibited Sexual Conduct Involving Prisoners” and the Department Employee Handbook, staff are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred involving a prisoner under the jurisdiction of the Department including third party and anonymous complaints.*

Interviews with Administration, and Inspectors, indicated that LCRRP did not have any allegations of this nature.

## 115.62 Agency protection duties

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- PREA Risk Assessment: *EE. Whenever a prisoner is subject to imminent risk of sexual abuse or is the alleged victim of sexual abuse, the facility shall take immediate action to protect the prisoner by preventing contact between the alleged abuser and alleged victim. Action to protect the prisoner may include, but is not limited to, changes in housing units and/or assignments, transfers, and stop orders. Staff shall make every effort to avoid transferring prisoners if the prisoner is the subject/victim of a pending investigation in order to conduct thorough face-to-face interviews. All actions taken to protect the prisoner, including rationale for a transfer and the amount of time between the report and when action was taken must be documented.*

Random Interviews with Staff, Inmates, and Administration indicated that immediate provisions would be taken if an imminent risk was suspected or reported regarding the safety of any offender. Inmates indicated that they would feel comfortable reporting fear of sexual violence towards them or others to staff in the immediate areas.

## 115.63 Reporting to other confinement facilities

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Reporting Prohibited Conduct: *V. 1. For allegations of abuse within the MDOC - To the appropriate facility head. The Inter-Administration Investigation Protocol issued by the CFA and FOA Deputy Directors shall be followed if the allegation is regarding the conduct of an employee from another Administration. The appropriate facility head shall verify whether the allegation had been previously investigated. If not, s/he shall ensure the allegation is entered into the Department’s computerized database and investigated in a timely manner. A courtesy copy shall be forwarded to the Department’s PREA Administrator.*

Random Staff, Inmate, Inspectors, and Administration interviews indicated that no reports of abuse at other location occurred at LCRRP.

- (b) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Reporting Prohibited Conduct: V...., If the allegations pertain to conduct at another facility (including county jails, another state prison, federal prison or substance abuse program facility), the Warden shall provide email notification within 72 hours...
- (c) See (a)
- (d) See (a)

#### 115.64 Staff first responder duties

##### Auditor Overall Determination: Meets Standard

##### Auditor Discussion

- (a) to (b) The PREA Manual- Response to Reported/Detected Sexual Abuse- First Responder Duties: *Upon learning of an allegation that a prisoner was sexually abused, the first staff member to respond shall be required to take action as follows: Non-custody staff shall immediately notify his/her chain of command for a referral to the Inspector. The non-custody staff member shall also request that the prisoner victim not take any action that could destroy potential physical and/or forensic evidence.*

*Custody staff shall:*

- (1) Separate the alleged victim and abuser;*
- (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, if applicable;*
- (3) If the abuse is alleged to have occurred within the past 96 hours, request that the victim and ensure that the abuser not take any action that could destroy potential physical and/or forensic evidence including but not limited to washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.*

Random Staff interviews indicated that staff were aware of their responsibility regarding their response.

PD 03.04.125 Medical Emergencies outlined facility's response to any Medical Emergency at an MDOC facility

Michigan Department of Corrections Sexual Violence Response and Investigation Guide was provided to this auditor.

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- VIII. Reporting of and First Response to Sexual Assaults:

*a. Initial Report and Separation.*

- 3. The supervisor, through his/her chain of command, ensuring the alleged victim and alleged suspect are physically separated, either through the placement of one or both offenders in segregations, through staff transfer or leave (including suspension), or some other effective means.*

## 115.65 Coordinated response

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

The facility abides by all tenets of the PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners and the PREA Manual-Facility Plan: which requires that *“This manual shall be considered the Department’s institutional plan to coordinate actions taken in response to an allegations of sexual abuse.”*

Interviews with Random Staff, Inmates, and Administration indicated that the facility is abiding by the policies and procedure outlined in the aforementioned paragraph.

## 115.66 Preservation of ability to protect inmates from contact with abusers

### Auditor Overall Determination: Audited at Agency Level

#### Auditor Discussion

Lake County Sheriff’s Deputies can be reassigned by Administration to the Lake County Jail during the duration of the investigation if/when a sexual abuse allegation occurs against them.

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The MDOC's PREA Manual's language mirrors the language of the standard. A review of the seven collective bargaining agreements entered into on behalf of the agency since the effective date of the PREA standards, includes agreements with the Michigan State Employee's Association (MSEA), American Federation of State, County, Municipal Employees (AFSCME), Michigan Corrections Organization (MCO), Service Employee's International Union (SEIU)-Scientific and Engineering bargaining unit, Service Employee's International Union (SEIU)-Technical bargaining unit, Service Employee's International Union (SEIU)- Human Services Support Bargaining Unit and United Auto Workers (UAW)-Administrative Support Unit and Human Services Unit. All agreements preserve the ability of the employer to remove alleged staff abusers from contact with inmates. Specifically, when warranted, the employer may take actions that include suspension of an employee during the course of an investigation. This suspension may continue until the time where disciplinary actions are determined.*

## 115.67 Agency protection against retaliation

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- Definitions: *T. All prisoners and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations are protected from retaliation for reporting the incident or participating in the investigation.*

PREA Manual- Protection from Retaliation: *Policy Directive 03.03.140 “Prohibited Sexual Conduct Involving Prisoners” requires that all prisoners and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations are protected from retaliation for reporting or participating in the investigation. Upon receipt of a sexual abuse allegation, staff shall initiate 90 calendar day retaliation monitoring using the appropriate form. If the investigation determines that the allegation is No Evidence/Unfounded, the retaliation monitoring shall discontinue. The form shall be maintained for the PREA Audit.*

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- II. Definitions and Clarification of Prohibited Conduct- 11. Retaliation: *An act of vengeance, covert or overt action or threat of action taken against an offender in response to the offender’s complaint of sexual misconduct or cooperation in the reporting or investigation of sexual misconduct, regardless of the merits or the disposition of the complaint. Examples of acts of relations are unnecessary discipline, intimidation, unnecessary changes in work or program assignments, unjustified transfers or placement and unjustified denials of privileges or services.*

**(b) Michigan Department of Corrections Memorandum:**

At LCRRP a variety of protective measures can be employed to protect inmate victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

- Abusers (staff/inmate) would be removed from the facility
- Housing assignments can be changed to increase staff monitoring of inmate victims measures to protect inmates victims

The PREA Manual- Protection from Retaliation:

*Staff members who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations may also contact the State Employee Service Program for emotional support services. Staff may also submit a complaint/grievance.*

*Prisoners who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations shall also be provided emotional support services as outlined in the Confidential Support Services section of this manual.*

**(c) The PREA Manual- Protection from Retaliation: Upon receipt of a sexual abuse allegation, staff shall initiate 90 calendar day retaliation monitoring using the appropriate form. If the investigation determines that the allegation is No Evidence/Unfounded, the retaliation monitoring shall discontinue. The form shall be maintained for the PREA Audit.**

*The Department shall monitor for changes that may suggest possible retaliation by prisoners or staff, regardless if the prisoner is transferred, as follows:*

- **Staff who report sexual abuse** – Supervisory staff, other than the direct supervisor, shall monitor for retaliatory performance reviews, reassignments and other retaliatory action not substantiated as legitimate discipline or performance matter.
- **Prisoners who report sexual abuse or have been an alleged victim of a report of sexual abuse** – Supervisory staff shall monitor for disciplinary sanctions, housing/program changes and also conduct periodic status checks.

*The Department shall act promptly to remedy any retaliation and continue such monitoring beyond 90 calendar days if the initial monitoring indicates a need.*

*Retaliation can be reported as outlined in the Reporting and Recording Sexual Abuse and Sexual Harassment Allegations section of this manual.*

*If any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation, including 90 calendar day retaliation monitoring if deemed necessary.*

*All monitoring shall be documented on the PREA Retaliation Monitoring form. Staff shall document if the retaliation monitoring discontinued based on a No Evidence/Unfounded finding.*

- (d) The PREA Manual- Protection from Retaliation indicates that there will be periodic status checks.
- (e) The PREA Manual- Protection from Retaliation: *If any other individual who cooperates with an investigation expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation, including 90 calendar day retaliation monitoring if deemed necessary.*
- (f) The PREA Manual- Protection from Retaliation: *If the investigation determines that the allegation is No Evidence/Unfounded, the retaliation monitoring shall discontinue.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility.

#### **115.68 Post-allegation protective custody**

##### **Auditor Overall Determination: Meets Standard**

##### **Auditor Discussion**

*The PREA Manual: A prisoner at high risk for sexual victimization or who has been the victim of sexual abuse shall not be placed in temporary segregation unless a review of all available alternatives has been made and there are no less restrictive means of separation from likely abusers. If the review cannot be conducted immediately, the prisoner may be held in temporary segregation for up to 24 hours while the review is completed.*

Administration and Staff confirmed that there is not segregation at LCRRP.

During Random Staff and Inmate interviews there was a cultural barrier that could possible limits an offender's ability to report. Both random staff and inmates believed that alleged victims and abusers would have to be sent to the Lake County Jail pending the outcome of the investigation. This was addressed with Administration and confirmed not be protocol, nor applicable, for alleged victims of sexual abuse allegations.

Administration immediately responded to the staff's cultural misunderstanding and issued Memorandum "PREA-Victims Protective Custody" which indicated:

*The Michigan Department of Corrections Prison Rape Elimination Act (PREA) Manual documents actions that the Lake County Residential Reentry (LCRRP) facility staff must take to protect a parolee who is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse.*

*The PREA Manual specifies in part, under the paragraph **PROTECTIVE CUSTODY**:*

***Parolees at high risk for sexual victimization or who are alleged to have suffered sexual abuse shall not be placed in involuntary temporary segregation unless an***

*assessment of all available alternatives is complete and determination has been made that no less restrictive means of separation from likely abusers exist.*

*Confinement at the Lake County jail can be defined as involuntary temporary segregation.*

Additionally, email from facility Supervisor indicated that the memo was shared with offenders and a meeting was held to clarify LCRRP position regarding whom and when an offender could be sent to Lake County Jail post allegation.

## **115.71 Criminal and administrative agency investigations**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a)** Policy Directives 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *DD. Investigations of prohibited sexual conduct shall be completed by staff who have received specialized investigator training as outlined in the PREA Manual. All investigations shall be conducted promptly, thoroughly and objectively. All PREA investigations shall be conducted in accordance with the Sexual Abuse/Sexual Harassment Investigations portion of the PREA Manual.*

Michigan Department of Corrections Sexual Violence Response and Investigation Guide requires that *“All investigations shall be conducted promptly, thoroughly and objectively.”*

The PREA Manual- Reporting and Recording Sexual Abuse and Sexual Harassment Allegations- Staff Reporting: *In accordance with PD 03.03.140 “Prohibited Sexual Conduct Involving Prisoners” and the Department Employee Handbook, staff are required to immediately report any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred involving a prisoner under the jurisdiction of the Department including third party and anonymous complaints. ... These reports may be made privately to the appropriate supervisory staff or through the MDOC Sexual Abuse Hotline or by completing a Department Sexual Abuse/Sexual Harassment Complaint form on the MDOC website. The MDOC Sexual Abuse Hotline and website Complaint form are available to staff, the public and third party complainants.*

The PREA Manual: *When receiving any report of sexual abuse or sexual harassment, regardless of the source, staff shall promptly document and forward the complaint to the appropriate supervisory staff for investigation.*

- (b)** Policy Directives 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *DD. Investigations of prohibited sexual conduct shall be completed by staff who have received specialized investigator training as outlined in the PREA Manual.*
- (c)** MDOC curriculum is Crime Scene Management and Preservation. References include United State Army Criminal Investigation Command and Michigan State Police Training Materials.

Interview with MDOC Investigators indicated that their investigation was limited to Administrative investigations. Michigan State Police will conduct any criminal investigation if criminal findings are discovered. The MDOC Inspectors are trained using curriculum Crime Scene Management and Preservation.

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA requires specialized training be provided for employees who may respond, to reported incidents of sexual assaults. This policy requires Crime Scene Management and Evidence collection protocol. The Lake County Sheriff's Office will dispatch Law Enforcement Deputies and Detectives whom will conduct/refer any criminal investigation if criminal findings are discovered.

The Lake County Sheriff's Detectives are trained during Michigan Police Basic Training using course 110-Michigan Commission on Law Enforcement Standards--Basic Training Curriculum (which included Special Investigation Sexual Assault Investigation) and receive additional training provided online at the PREA Resource Center <https://www.prearesourcecenter.org/file/1969/specialized-training-investigating-sexual-abuse-confinement-settings>

- (d)** MDOC Policy Directives 03.03.140 Prohibited Sexual Conduct Involving Prisoners- directs that allegations of sexual assault against staff shall be reported to the Michigan State Police or other appropriate law enforcement agencies for investigation.

MDOC PREA Manual states that "...staff shall ensure all allegations are referred to the appropriate law enforcement agency...for criminal investigation in conjunction with the Department's administrative investigation. Referrals to law enforcement shall be documented..." "...the Department shall ensure that all Sufficient Evidence/Substantiated investigations that appear to be criminal are referred for prosecution."

- (e)** The PREA Manual: *The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as "prisoner" or "staff." A prisoner who alleges sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device/serum as a condition for proceeding with the investigation of an allegations.*

- (f)** The PREA Manual- *Department investigative reports shall include:*

- (1) An effort to determine whether staff actions or inaction contributed to the abuse;*
- (2) A description of the physical, forensic and testimonial evidence;*
- (3) The reasoning behind credibility assessments; and,*
- (4) Investigative facts and findings.*

*The outcome of the investigation shall be documented in pertinent computerized database entry(ies), including administrative findings and information related to the criminal investigation, including charges and disposition. The investigation shall be processed in accordance with applicable Manuals and Department policies.*

- (g) to (h)** Lake County Sheriff's Law Enforcement officers and Detectives conduct criminal investigations: Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA requires that Lake County Sheriff's Office will dispatch Law Enforcement Deputies and Detectives whom will conduct/refer any criminal investigation if criminal findings are discovered. Letter d. Prosecutions: *The investigators thoroughly documents each case and collects evidence for criminal prosecution of sexual assaults.*



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

The PREA Manual- Referral for Prosecution: *Upon completion of the investigation and in accordance with policy, the Department shall ensure that all Sufficient Evidence/Substantiated investigations that appear to be criminal are referred for prosecution. The assigned investigator shall remain informed about the progress of the criminal investigation and disposition. Documentation of such information shall be recorded in the Department investigative report, PREA investigation worksheet(s), pertinent computerized database entry(ies) and forwarded to the Office of Legal Affairs.*

- (i) The PREA Manual: *All investigative reports relating to sexual abuse allegations shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five years.*
- (j) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- MM. *The investigation shall not be closed simply due to the resignation, transfer, or termination of the accused staff person.*

The PREA Manual- Collective Bargaining: *The Department, or another governmental entity on behalf of the Department, shall not enter into or renew any collective bargaining agreements that: (6) Prohibits referral to law enforcement and relevant licensing bodies, regardless of whether the staff member resigned.*

Additionally requires that: *A thorough investigation shall be completed even if:*

- (1) *The alleged abuser departs from Department employment;*
- (2) *The victim or perpetrator departs from the control of the facility; or*
- (3) *The victim or perpetrator departs from control of the Department.*

(k) See (a)-(j)

- (l) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- KK...., The Department investigation shall be coordinated as necessary with the investigating law enforcement agency.

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility.

## **115.72 Evidentiary standard for administrative investigations**

**Auditor Overall Determination: Meets Standard**

### **Auditor Discussion**

The PREA Manual- Collective Bargaining: *The Department, or another governmental entity on behalf of the Department, shall not enter into or renew any collective bargaining agreements that: (2) Imposes a standard higher than preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated;*

Basic Investigator Training: 1. Administrative-..., *Preponderance of the evidence (in theory 51%) is the general principle that is used administratively.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility.

### **115.73 Reporting to inmates**

#### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *GG. The Warden or Lake County Residential Reentry Program (LCRRP) Manager, as appropriate, shall ensure that the complainant and the victim, if not the complainant, are notified in writing of the final disposition of an investigation involving prisoner-on-prisoner sexual abuse, staff sexual misconduct/sexual harassment or staff overfamiliarity. This shall include notification of whether any disciplinary action has been taken. However, details of the discipline, including the specific charges and sanctions, shall not be provided.*

The PREA Manual- Prisoner Notification Following an Investigation: *Following investigation of an allegation a prisoner suffered sexual abuse in a facility, the appropriate Warden or Administrator shall ensure the victim is notified in writing as to whether the allegation has been Substantiated/Sufficient Evidence, Unsubstantiated/Insufficient Evidence or Unfounded/No Evidence.*

- (b)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *If notification is unable to be provided, the attempts shall be documented as well as the rationale for the inability to notify.*
- (c)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *For Substantiated/Sufficient Evidence allegations that a staff member sexually abused a prisoner, the facility shall subsequently inform the prisoner whenever:*
- (1) Any disciplinary action is taken. However, details of the discipline including the specific charges and sanctions shall not be provided;*
  - (2) The staff member is no longer posted within the prisoner's unit;*
  - (3) The staff member is no longer employed at the facility;*
  - (4) The Department learns the staff member has been indicted on a charge related to sexual abuse within the facility; or*
  - (5) The Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility.*
- (d)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *For allegations that a prisoner was sexually abused by another prisoner, the Department shall subsequently inform the alleged victim whenever:*
- (1) The Department learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or*
  - (2) The Department learns that the alleged abuser has been convicted on the charge related to sexual abuse within the facility.*
- (e)** PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *All such notifications shall be documented using the appropriate form. If notification is unable to be provided, the attempts shall be documented as well as the rationale for the inability to notify. A copy of the form shall be maintained for the PREA Audit.*

- (f) PD 03.03.140 Prohibited Sexual Conduct Involving Prisoners- *The Department's obligation to provide notification as outlined in this section shall terminate if the prisoner is paroled, discharged from his/her sentence, is vacated or the prisoner is pardoned.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

## **115.76 Disciplinary sanctions for staff**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) Agency policies 02.03.100, 02.03.100A, 03.03.140, the PREA Manual and the employee handbook work rules were reviewed by the auditor in determining compliance with provision (a) of the standard. The agency clearly establishes through existing policies that staff are subject to disciplinary action, up to and including termination for violating agency sexual abuse and sexual harassment policies, in compliance with provision (a) of the standard.
- (b) The staff sanctioning matrix provided to and reviewed by the auditor in policy 02.03.100A verifies that termination is the presumptive disciplinary action for staff who engage in sexual abuse in compliance with provision (b) of the standard. There have been no substantiated instances of sexual abuse within the audit period to confirm agency practice. Based on policy provisions, the facility demonstrates it is in compliance with provision (b) of the standard.
- (c) The PREA Manual and staff sanctioning matrix provided to and reviewed by the auditor in policy 02.03.100A verifies that violations of sexual abuse and sexual harassment policies, other than engaging in sexual abuse, will be disciplined commensurate with the nature and circumstances of the acts, discipline history and comparable disciplinary actions consistent with provision (c). According to 02.03.100A, the Chief Deputy Director is responsible in determining the sanctions for these violations. There were no official acts of discipline issued by the facility during the course of the audit period for violations of sexual abuse and sexual harassment policies to confirm agency practice with respect to provision (c) of the standard. Based on policy provisions, the auditor determines compliance with provision (c).
- (d) Through the auditor's review of the PREA Manual, policy provisions exist to ensure that all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies, consistent with provision (d) of the standard. A review of the facility's investigations revealed no substantiated allegations of sexual abuse or sexual harassment against a staff member. There were no terminations or resignations in lieu of termination to demonstrate facility practice with respect to provision (d) standard. Based on policy provisions, the auditor determines compliance with provision (d).

## 115.77 Corrective action for contractors and volunteers

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) Under agency policy 03.03.140 and the PREA Manual, which were reviewed by the auditor in determining compliance with provision (a) of the standard, both contractors and volunteers are held to the same standards as employees directly hired by the agency when it comes to disciplinary action for engaging in sexual abuse and sexual harassment. Therefore, any contractor or volunteer engaging in these behaviors would presumptively be terminated or barred from the facility. The PREA Manual contains specific language to provide consideration for terminating contracts and prohibiting further contact with inmates in the case of any other violation of Department sexual abuse and sexual harassment policies. Finally, the PREA Manual requires reporting of such conduct to law enforcement and relevant licensing bodies consistent with provision (a) of the standard. Based upon policy provisions, the auditor determines compliance with provision (a).
- (b) The PREA Manual contains specific language to provide consideration for terminating contracts and prohibiting further contact with inmates in the case of any other violation of Department sexual abuse and sexual harassment policies, consistent with provision (b) of the standard. An interview with the Warden confirmed that any contractor or volunteer who violated sexual abuse or sexual harassment policies would be removed from the facility.

Michigan Department of Corrections Memorandum- "Investigation of Contractual Employees" outlines additional checks and balances to manage Contractual employee investigations.

Lake County Sheriff Department T-0036 Policy- Zero Tolerance/PREA- III. *Duties and Responsibilities- 6. Ensure offender or staff found guilty of committing sexual assault are disciplined in accordance with agency procedures, up to and including referral for criminal prosecution.*

## 115.78 Disciplinary sanctions for inmates

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) The auditor reviewed agency policy 03.03.105 and the PREA Manual when determining compliance with provision (a). These documents pair to confirm that inmates are only subjected to disciplinary sanctions pursuant to a formal disciplinary process following an administrative or criminal finding that sexual abuse occurred.

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

- (b) The auditor reviewed agency policy 03.03.105A and 03.03.105D, which were determined to establish a consistent sanctioning matrix for all substantiated allegations of sexual abuse and sexual harassment consistent with provision (b) of the standard.

Interviews with the Facility Supervisor, Staff Sergeant, and Sergeants indicated that the facility would move the alleged perpetrator to the Lake County Jail pending the outcome of the investigation.

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

- (c)** The auditor reviewed agency policy 03.03.105, and the PREA Manual which established procedures for the consideration of mental disabilities and mental illness when considering the appropriate type of sanction to be imposed, consistent with provision (c) of the standard.
- (d)** The auditor reviewed the agency PREA Manual, which directs that facilities offering relevant treatment modalities to address the underlying reasons or motivations for abuse consider placing offending inmates into such programs.

LCRRP does not have mental health treatment providers and utilizes community services to provide mental health care.

- (e)** Agency policy 03.03.140, was reviewed by the auditor, which dictates that allegations of inmate sexual assaults against staff shall be reported to MSP for investigation. Locally at LCRRP the Lake County Sheriff's Law enforcement will conduct the initial investigation and seek support from MSP is necessary.

Administration indicated that there have not been any inmate-on-staff sexual assaults, thus no discipline has been issued regarding this standard.

PREA Auditor and PREA Coordinator indicated knowledge that this requirement must be met if/when an allegation occurs.

- (f)** The auditor reviewed the PREA Manual when determining compliance with provision (f). This document prohibits disciplinary action against an inmate for making a report in good faith based upon a reasonable belief that an alleged act occurred. A review of facility investigations demonstrate that inmates are not subjected to disciplinary action for making reports of sexual abuse that cannot be proven, allowing the auditor to find compliance with provision (f).

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Auditor and PREA Coordinator indicated knowledge that this requirement must be met if/when an allegation occurs.

- (g)** Through a review of the PREA Manual, the Prisoner Guidebook and interviews with the PREA Administrator and PREA Coordinator, the auditor was informed that the agency prohibits sexual activity between all inmates. The PREA Manual indicates that inmates who engage in consensual sexual activity may be disciplined and sanctioned according to policy 03.03.105; however, the activity will not be considered sexual abuse unless it is determined that the sexual contact was the result of coerced consent or protective pairing. Based upon interviews and policy directives, the auditor determines compliance with provision (g).

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Consensual Sexual encounters at the facility that have been reported, observed, or discipline.

PREA Auditor and PREA Coordinator indicated knowledge that this requirement must be met if/when an allegation occurs.

#### **115.81 Medical and mental health screenings; history of sexual abuse**

##### **Auditor Overall Determination: Meets Standard**

##### **Auditor Discussion**

- (a)** The PREA Manual- Medical/Mental Health Screening: *If a PREA Risk Assessment or PREA Risk Assessment Review indicates a prisoner has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the prisoner is referred for a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.*

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous victimization medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

- (b)** The PREA Manual- Medical/Mental Health Screening: *If a PREA Risk Assessment or PREA Risk Assessment Review indicates a prisoner has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the prisoner is referred for a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening.*

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous perpetrated sexual abuse, medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

- (c)** See (a)

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous victimization medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

- (d)** The PREA Manual- Medical/Mental Health Screening: *Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other designated staff as necessary to inform treatment plans and security and management decisions including housing, bed, work, education and program assignments, or as otherwise required by federal, state, or local law.*

During interviews with the Medical Contractor it was clear that the individual was not properly trained and additionally it was not clear that the provider understood the requirements of the PREA Standards.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

The PREA Risk Assessments are not being stored in a secure location that limited access to details regarding prior sexual victimization.

On 6/30/2017 LCRRP provided documentation that all PREA Risk Assessments, and Reviews are being stored electronically and only retroactively accessible to the Facility Supervisor. Screenshots of the electronic system were provided as well as the scanned Risk Assessments that are being stored.

On 7/6/2017 LCRRP provided documentation that the practice of storing the PREA Risk Assessments in a secure locked cabinet is continuing. They also provided a photo of the lock cabinet that is located in the Supervisor's locked office. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (e) The PREA Manual- Medical/Mental Health Screening: *Medical and mental health care staff shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting. A copy of the prisoner's informed consent shall be maintained for the PREA audit.*

During interviews with the Medical Contractor it was clear that the individual was not properly trained and additionally it was not clear that the provider understood the requirements of the PREA Standards.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

## **115.82 Access to emergency medical and mental health services**

### **Auditor Overall Determination: Meets Standard**

#### **Auditor Discussion**

- (a) The PREA Manual- Medical/Mental Health Services following an allegation of Sexual Abuse- Initial Victims Services: *In accordance with PD 03.04.125 "Medical Emergencies" and PD 04.06.180 "Mental Health Services," prisoner victims of sexual abuse shall receive timely emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health staff.*

PD 03.04.125 Medical Emergencies: *Employees shall provide appropriate and timely response to medical emergencies consistent with the employee's training and the use of standard (i.e., universal) precautions.*

PD 04.06.180 Mental Health Services- General Information: *F. Qualified Mental Health Professionals (QMHP's) shall be available to provide mental health services. Prisoners in need of mental health services shall be identified in a timely manner, have reasonable access to care, and be afforded continuity of care, including aftercare planning and follow-up as indicated.*

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- X. Medical Services Responsibilities:

*a. Provision of Medical Care for Lake County Offenders (Alleged victims and Alleged Suspects)- Medical services follow established protocol, which includes prisons for examination, documentation, transport to local emergency medical care when appropriate, testing for sexually transmitted diseases (including an HIV test), counseling as appropriate, prophylactic treatment, follow up mental health counseling and support. All information is forwarded to the administrator and investigating officer.*

*b. Guidance for Medical Care and Investigation at Community Medical Facilities- Victims of sexual assault are referred under appropriate security provision to the community-based health care provider or hospital. The information is forwarded to the administrator and investigating officer.*

*c. Mental Health Care Provider- The mental health care provider or health administrator is notified as soon as possible, but no later than the next business day of all alleged sexual assaults. After providing mental health counseling, mental health care provider consults with the investigator regarding the investigation. Appropriate assistance/mental health services will be available to the offender victim (s) of sexual assault.*

Random Staff, Administration, Staff Sergeant, and Medical Contractors interviews indicated that if any offender has a medical or mental health emergency they are transported to the local emergency room.

- (b)** LCRRP does not have full time medical or mental health staff. Services are located and accessed in the community.

Random Interviews with Staff, Inmates, and Administration indicated that standard 115.62 would be adhered as immediate provisions would be taken if an imminent risk was suspected or reported regarding the safety of any offender. Inmates indicated that they would feel comfortable reporting fear of sexual violence towards them or others to staff in the immediate areas.

- (c) to (d)** PD 03.04.125 Medical Emergencies: *UU. ..., Prisoner victims of sexual abuse shall be provided treatment services without financial cost to the prisoner. VV. Facilities shall offer medical and mental health evaluations and treatment that is determined medically necessary to prisoners who have been victimized by sexual abuse. Female prisoner victims of sexual abuse shall be offered a pregnancy test. Prisoner victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted diseases as deemed medically appropriate. Treatment for services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.



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

### Auditor Overall Determination: Meets Standard

#### Auditor Discussion

- (a) The PREA Manual- Medical/Mental Health Screening- Ongoing Victims Services: *If a PREA Risk Assessment or PREA Risk Assessment Review indicates a prisoner has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the prisoner is referred for a follow-up meeting with a medical or mental health practitioner within 14 calendar days of the intake screening.*

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous victimization medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (b) The PREA Manual- Medical/Mental Health Screening: *The facility shall offer medical and mental health evaluation and, as appropriate, all treatment that is determined to be medically necessary to prisoners who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility. The evaluation and treatment shall include as deemed medically appropriate follow-up services, treatment plans, and when necessary referrals for continued care following their transfer or placement in other facilities.*

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous perpetrated sexual abuse, medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (c) The PREA Manual- Medical/Mental Health Services following an allegation of Sexual Abuse- Initial Victims Services: *In accordance with PD 03.04.125 "Medical Emergencies" and PD 04.06.180 "Mental Health Services," prisoner victims of sexual abuse shall receive timely emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health staff.*

PD 03.04.125 Medical Emergencies: *Employees shall provide appropriate and timely response to medical emergencies consistent with the employee's training and the use of standard (i.e., universal) precautions.*

PD 04.06.180 Mental Health Services- General Information: *F. Qualified Mental Health Professionals (QMHP's) shall be available to provide mental health services. Prisoners in need of mental health services shall be identified in a timely manner, have reasonable access to care, and be afforded continuity of care, including aftercare planning and follow-up as indicated.*

Lake County Sheriff Office PREA policy T-0036 Zero Tolerance/ PREA- X. Medical Services Responsibilities:

a. Provision of Medical Care for Lake County Offenders (Alleged victims and Alleged Suspects)- *Medical services follow established protocol, which includes prisons for examination, documentation, transport to local emergency medical care when appropriate, testing for sexually transmitted diseases (including an HIV test), counseling as appropriate, prophylactic treatment, follow up mental health counseling and support. All information is forwarded to the administrator and investigating officer.*

b. Guidance for Medical Care and Investigation at Community Medical Facilities- *Victims of sexual assault are referred under appropriate security provision to the community-based health care provider or hospital. The information is forwarded to the administrator and investigating officer.*

c. Mental Health Care Provider- *The mental health care provider or health administrator is notified as soon as possible, but no later than the next business day of all alleged sexual assaults. After providing mental health counseling, mental health care provider consults with the investigator regarding the investigation. Appropriate assistance/mental health services will be available to the offender victim (s) of sexual assault.*

Random Staff, Administration, Staff Sergeant, and Medical Contractors interviews indicated that if any offender has a medical or mental health emergency they are transported to the local emergency room.

Through interviews with the PREA Coordinator, and staff that conduct the PREA Risk Assessments, it was determined that if an offender's screening indicated previous victimization medical and mental health services were not currently being offered to the offenders at the time of the onsite audit.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (d)** PD 03.04.125 Medical Emergencies: *VV. ..., Female prisoner victims of sexual abuse shall be offered a pregnancy test. Prisoner victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted diseases as deemed medically appropriate. Treatment for services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

- (e)** The PREA Manual- Medical/Mental Health Screening- Ongoing Victims Services: *Prisoner victims of sexually abusive vaginal penetration while incarcerated shall be offered a pregnancy test. If the pregnancy test is positive, the victim shall receive timely and comprehensive information and access to all lawful pregnancy-related medical services.*

During interviews with the Medical Contractor it was clear that the individual was not properly trained and additionally it was not clear that the provider understood the requirements of the PREA Standards.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (f) The PREA Manual- Medical/Mental Health Screening- Ongoing Victims Services: *Prisoner victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections/diseases as deemed medically appropriate.*

During interviews with the Medical Contractor it was clear that the individual was not properly trained and additionally it was not clear that the provider understood the requirements of the PREA Standards.

On 6-26-2017 LCRRP provided documentation that the contracted medical providers had received, and understand, the training curriculum Michigan Department of Corrections Sexual Abuse and Sexual Harassment in Confinement for Healthcare Staff.

On 7/28/2017 LCRRP provided documentation that the practice that all offenders who had disclosed prior victimization of sexual abuse, or perpetrated sexual abuse, were offered medical/mental health evaluations. I am satisfied with this documentation that the practice is occurring and will continue to occur with future receptions.

- (g) The PREA Manual- Medical/Mental Health Screening- Ongoing Victims Services: *Treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.*

- (h) The PREA Manual- Medical/Mental Health Screening- Ongoing Abuser Services: *Within 60 calendar days of learning of a known prisoner-on-prisoner abuser, mental health staff shall attempt to conduct a mental health evaluation of the abuser's history and offer treatment as deemed appropriate.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility. PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

#### **115.86 Sexual abuse incident reviews**

**Auditor Overall Determination: Meets Standard**

##### **Auditor Discussion**

- (a) The PREA Manual- Sexual Abuse Incident Review: *The facility PREA Coordinator shall coordinate a sexual abuse incident review at the conclusion of every sexual abuse investigation unless the allegation was determined to be No Evidence/Unfounded.*
- (b) The PREA Manual- Sexual Abuse Incident Review: *Such review shall generally occur within 30 calendar days after the conclusion of the investigation.*

- (c) The PREA Manual- Sexual Abuse Incident Review: *The review team shall include upper-level custody and administrative staff, with input from relevant supervisory staff, investigators, and medical or mental health practitioners or others as appropriate.*
- (d) The PREA Manual- Sexual Abuse Incident Review: *The review team shall:*
- (1) *Consider whether the allegation or investigation indicates a need to change policy or practice to prevent, detect or respond to sexual abuse;*
  - (2) *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 was motivated or otherwise caused by other group dynamics at the facility;*
  - (3) *Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;*
  - (4) *Assess the adequacy of staffing levels in that area during different shifts;*
  - (5) *Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and*
  - (6) *Prepare a report of its findings including but not necessarily limited to determinations made pursuant to (1) through (5) and any recommendations for improvement and submit such report to the Warden or Administrator with a courtesy copy to the Department PREA Administrator and facility PREA Coordinator.*
- (e) The PREA Manual- Sexual Abuse Incident Review: *The Warden shall review and forward through the chain of command to the Deputy Director (CFA) or designee for consideration of recommendations for improvement. If the recommendations are not implemented, the rationale for not doing so shall be documented on the PREA Sexual Abuse Incident Review form.*

Random Staff, Inmate, PREA Coordinator, Inspectors, and Administration interviews indicated that there have not been any Sexual Abuse nor Harassment allegations at the facility.

PREA Analyst, PREA Coordinator, Administration, and Staff Sergeant indicated knowledge that this requirement must be met if/when an allegation occurs.

## 115.87 Data collection

### **Auditor Overall Determination: Audited at Agency Level**

#### **Auditor Discussion**

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The PREA Manual also states that the Department PREA Administrator gathers data on each reported incident to aggregate an annual incident report. The report will include, at a minimum, the data necessary to complete the annual Department of Justice Survey on Sexual Violence. The Department shall provide all data to the U.S. Department of Justice from the previous calendar year upon request no later than June 30.*

*A review of the agency's annual PREA statistics for 2015 and the Survey of Sexual Violence 2015 took place to confirm that the data collected is uniformly sufficient to complete the annual Survey of Sexual Violence.*

*The agency prepares an annual statistical report that is published on the agency's public website. This report aggregates information collected through the investigatory database and provides comparative summaries to previous year's data. The agency began its commitment to PREA compliance in 2014, therefore, statistical information only exists for 2014 and 2015. This report is published to the agency's website prior to June 30th each year and is available to the Department of Justice if needed.*

*A review of the agency's annual PREA statistics for 2015 and the Survey of Sexual Violence 2015 took place to confirm that the data collected is uniformly sufficient to complete the annual Survey of Sexual Violence. According to interviews with the agency PREA Administrator and a review of the PREA Manual, the agency collects and maintains data from a variety of sources.*

*In addition to the agency investigation database, each sexual abuse incident review is sent to the agency PREA Administrator as a courtesy and means of data collection. The agency does not contract with other entities for the confinement of its inmates; therefore, there is no aggregate data to collect from these facilities.*

#### **115.88 Data review for corrective action**

**Auditor Overall Determination: Audited at Agency Level**

**Auditor Discussion**

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The agency prepares an annual PREA statistical report to assess and improve its effectiveness of preventing and detecting sexual abuse. The agency's 2015 report identified its efforts to continue training Department investigators, the inmate population and expand reporting options for third parties. The agency also reported that it began conducting PREA audits of its facilities during 2015, with an intent to continue this activity until all agency facilities have been audited.*

*The agency's 2015 annual PREA report compares data from 2014. It is important to note that the agency committed to PREA compliance in 2014, therefore, limited data is available for comparative purposes. The 2015 annual report summarizes the state of the agency's progress with achieving PREA compliance at its facilities, specifically, referring to its training and auditing progress.*

*The agency head's designee confirmed during an interview that the Director approves the agency's annual PREA report prior to publication on the agency website and provided policy 01.01.101 relative to Director's approval. The agency does not redact information from its annual report.*

#### **115.89 Data storage, publication, and destruction**

**Auditor Overall Determination: Audited at Agency Level**

**Auditor Discussion**

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its**

**entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The PREA Manual specifies that data must be security retained. An interview with the agency PREA Administrator confirms that only he has access to the agency's overall data pool for PREA information. There are a limited number of upper agency administrators above the PREA Administrator who have access to the agency investigative database.*

*The agency's 2015 annual PREA report compares aggregate data from 2014. It is important to note that the agency committed to PREA compliance in 2014, therefore, limited data is available for comparative purposes. The 2015 annual report summarizes the state of the agency's progress with achieving PREA compliance at its facilities, specifically, referring to its training and auditing progress. This report is published on the agency website. The annual agency PREA report does not contain any personal identifying information.*

*The agency's 2015 annual PREA report compares aggregate data from 2014. It is important to note that the agency committed to PREA compliance in 2014, therefore, limited data is available for comparative purposes. The agency continues to publish its 2014 report alongside the 2015 annual report.*

#### **115.401 Frequency and scope of audits**

##### **Auditor Overall Determination: Audited at the Agency Level**

##### **Auditor Discussion**

The Lake County Residential Reentry Program was very accommodating during the audit and provided unfettered access to all matters requested. The facility provided the auditor full access to all areas of the facility to demonstrate compliance with provision (h) of the standard. The auditor was provided copies of all documents requested. The auditor was able to conduct inmate interviews in a private setting in accordance with provision (m) of the standard. The auditors were provided private offices where interviews occurred. During the audit tour, the auditor observed that the notice of audit was prominently displayed throughout all housing units and common areas of the facility. This auditor did not receive any correspondences from any inmate at the facility prior to the audit. (n) of the standard.

**This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.**

*The agency made a commitment to PREA compliance in 2014, therefore, the agency has not had each of its individual facilities audited at the time of this agency audit. The agency entered into a circular auditing consortium formed between the Maryland Department of Public Safety and Correctional Services, the Michigan Department of Corrections, the Pennsylvania Department of Corrections and Wisconsin Department of Corrections. The purpose of the audit was to determine compliance with the Prison Rape Elimination Act standards which became effective August 20, 2012. Through this consortium, all of the agency's facilities will be audited prior to the conclusion of the second audit cycle on August 19, 2019.*

*The facility is not held in a non-compliant status due to the agency audit taking place at the beginning of the second audit cycle and the agency's commitment to PREA compliance and auditing of all of its facilities as noted through the circular auditing consortium.*

## 115.403 Audit contents and findings

### **Auditor Overall Determination: Audited at Agency Level**

#### **Auditor Discussion**

This auditor did access the public website and noted that there are 6 Audits posted from 2013-2014 and the 2015 PREA Yearly Report. The reports are located at <http://www.mdoc.ms.gov/Divisions/Pages/PREA-Audit-Reports.aspx>

***This Standard was audited at the Agency Level by DOJ Certified PREA Auditor Carol Mattis. The Final Report was issues on December 16, 2016 and I have reviewed the report in its entirety. Below is Auditor Discussion from the report that validated the standard is met at the Agency Level.***

*To date, the agency has demonstrated that it is willing to publish all audit reports on its public website. At the time of this audit, the agency had published all six previous audit reports to its website.*