

PREA Facility Audit Report: Final

Name of Facility: Oaks Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 09/30/2022

| Auditor Certification | |
|---|--------------------------------------|
| The contents of this report are accurate to the best of my knowledge. | <input checked="" type="checkbox"/> |
| No conflict of interest exists with respect to my ability to conduct an audit of the agency under review. | <input checked="" type="checkbox"/> |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. | <input checked="" type="checkbox"/> |
| Auditor Full Name as Signed: Alton Baskerville | Date of Signature: 09/30/2022 |

| AUDITOR INFORMATION | |
|-------------------------------------|----------------------------|
| Auditor name: | Baskerville, Alton |
| Email: | alton.abm@preaauditors.com |
| Start Date of On-Site Audit: | 08/29/2022 |
| End Date of On-Site Audit: | 08/31/2022 |

| FACILITY INFORMATION | |
|-----------------------------------|--|
| Facility name: | Oaks Correctional Facility |
| Facility physical address: | 1500 Caberfae Highway , Manistee, Michigan - 49660 |
| Facility mailing address: | |

| Primary Contact | |
|--------------------------|-----------------------|
| Name: | Candace Newton |
| Email Address: | NewtonC3@michigan.gov |
| Telephone Number: | 517-281-5956 |

| Warden/Jail Administrator/Sheriff/Director | |
|--|-----------------------|
| Name: | Michael Burgess |
| Email Address: | BurgessM@michigan.gov |
| Telephone Number: | (231) 723-8272 |

| Facility PREA Compliance Manager | |
|----------------------------------|-------------------------|
| Name: | Matthew Silsbury |
| Email Address: | Silsburym1@michigan.gov |
| Telephone Number: | O: (517) 281-7716 |

| Facility Health Service Administrator On-site | |
|---|----------------------|
| Name: | Nicki Monroe |
| Email Address: | MonroeN@michigan.gov |
| Telephone Number: | (231)723-8272 |

| Facility Characteristics | |
|--|---------|
| Designed facility capacity: | 1108 |
| Current population of facility: | 1022 |
| Average daily population for the past 12 months: | 1005 |
| Has the facility been over capacity at any point in the past 12 months? | No |
| Which population(s) does the facility hold? | Males |
| Age range of population: | 19-81 |
| Facility security levels/inmate custody levels: | 2 and 4 |
| Does the facility hold youthful inmates? | No |
| Number of staff currently employed at the facility who may have contact with inmates: | 310 |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 80 |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility: | 16 |

| 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: | |
| Telephone number: | (517) 373-3966 |

| Agency Chief Executive Officer Information: | |
|---|---------------------------|
| Name: | Heidi E. Washington |
| Email Address: | WashingtonM6@michigan.gov |
| Telephone Number: | 517-780-5811 |

| Agency-Wide PREA Coordinator Information | | | |
|--|-----------------|-----------------------|------------------------|
| Name: | Charles Carlson | Email Address: | CarlsonC2@michigan.gov |

| SUMMARY OF AUDIT FINDINGS | |
|--|--|
| <p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p> | |
| Number of standards exceeded: | |
| 0 | |
| Number of standards met: | |
| 45 | |
| Number of standards not met: | |
| 0 | |

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

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| 1. Start date of the onsite portion of the audit: | 2022-08-29 |
| 2. End date of the onsite portion of the audit: | 2022-08-31 |

Outreach

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

AUDITED FACILITY INFORMATION

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|--|--|
| 14. Designated facility capacity: | 1108 |
| 15. Average daily population for the past 12 months: | 1005 |
| 16. Number of inmate/resident/detainee housing units: | 7 |
| 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? | <input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) |

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

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

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|---|------|
| 36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit: | 1032 |
| 38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit: | 10 |
| 39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 0 |
| 40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit: | 0 |
| 41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit: | 28 |

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| 42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit: | 3 |
| 43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit: | 0 |
| 44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit: | 4 |
| 45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit: | 0 |
| 46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit: | 0 |
| 47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit: | 0 |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | The facility could not track the number and characteristics of various inmate groups. |
| Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit | |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit: | 310 |
| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 0 |
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees: | 0 |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | Facility staff was unable to list exact number of volunteers and contractors on first day of audit. |
| INTERVIEWS | |
| Inmate/Resident/Detainee Interviews | |
| Random Inmate/Resident/Detainee Interviews | |
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed: | 30 |

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| <p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p> | <p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input type="checkbox"/> Gender</p> <p><input type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p> |
| <p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p> | <p>Inmates were selected from all housing units.</p> |
| <p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
| <p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p> | <p>There were no barriers to interviewing the random or targeted inmates.</p> |
| <p>Targeted Inmate/Resident/Detainee Interviews</p> | |
| <p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p> | <p>18</p> |
| <p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p> | |
| <p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>3</p> |
| <p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |

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| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> |
| <p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>0</p> |
| <p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p> | <p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p> |
| <p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p> | <p>Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> |
| <p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>3</p> |
| <p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p> | <p>1</p> |
| <p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>3</p> |
| <p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p> | <p>2</p> |
| <p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p> | <p>5</p> |

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| 68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol: | 2 |
| 69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol: | 2 |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category: | <input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees). | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. |
| 70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews): | No additional comments noted. |
| Staff, Volunteer, and Contractor Interviews | |
| Random Staff Interviews | |
| 71. Enter the total number of RANDOM STAFF who were interviewed: | 22 |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply) | <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None |
| If "Other," describe: | Female staff were interviewed due to their minority status in the facility. |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews? | <input checked="" type="radio"/> Yes <input type="radio"/> No |

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| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | Random staff from all shifts were interviewed. |
| Specialized Staff, Volunteers, and Contractor Interviews | |
| Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements. | |
| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 16 |
| 76. Were you able to interview the Agency Head? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 78. Were you able to interview the PREA Coordinator? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 79. Were you able to interview the PREA Compliance Manager? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards) |

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

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

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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|---|---|
| <p>84. Did you have access to all areas of the facility?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
|---|---|

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

| | |
|--|---|
| <p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
|--|---|

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|---|--|
| 86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 88. Informal conversations with staff during the site review (encouraged, not required)? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations). | All areas of the facility were accessible to the auditor. |

Documentation Sampling

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

| | |
|---|---|
| 90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation? | <input checked="" type="radio"/> Yes <input type="radio"/> No |
| 91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.). | Twelve random inmate record files were selected for review. Also, twelve employee record files were randomly selected and reviewed. |

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

| | # of sexual abuse allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|--------------------------------------|-------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual abuse | 3 | 3 | 3 | 0 |
| Staff-on-inmate sexual abuse | 23 | 23 | 23 | 0 |
| Total | 26 | 26 | 26 | 0 |

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

| | # of sexual harassment allegations | # of criminal investigations | # of administrative investigations | # of allegations that had both criminal and administrative investigations |
|---|------------------------------------|------------------------------|------------------------------------|---|
| Inmate-on-inmate sexual harassment | 6 | 0 | 6 | 0 |
| Staff-on-inmate sexual harassment | 26 | 0 | 26 | 0 |
| Total | 32 | 0 | 32 | 0 |

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--------------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0 | 0 | 3 | 0 |
| Staff-on-inmate sexual abuse | 0 | 10 | 17 | 1 |
| Total | 0 | 10 | 17 | 1 |

Sexual Harassment Investigation Outcomes

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

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

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

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

| | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|---|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual harassment | 0 | 1 | 4 | 1 |
| Staff-on-inmate sexual harassment | 0 | 8 | 17 | 1 |
| Total | 0 | 9 | 21 | 2 |

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

| | |
|--|---|
| 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: | 6 |
| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) |

Inmate-on-inmate sexual abuse investigation files

| | |
|---|---|
| 100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled: | 3 |
|---|---|

| | |
|--|---|
| <p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p> |
| <p>Staff-on-inmate sexual abuse investigation files</p> | |
| <p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p> | <p>23</p> |
| <p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |
| <p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p> |
| <p>Sexual Harassment Investigation Files Selected for Review</p> | |
| <p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>6</p> |
| <p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p> |
| <p>Inmate-on-inmate sexual harassment investigation files</p> | |
| <p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>6</p> |

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| <p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
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| <p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p> |
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Staff-on-inmate sexual harassment investigation files

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| <p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p> | <p>26</p> |
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| <p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
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| <p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p> |
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| <p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p> | <p>Files were thorough and easy to review.</p> |
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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| <p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> |
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Non-certified Support Staff

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| <p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p> | <p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> |
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| a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit: | 3 |
|---|---|

AUDITING ARRANGEMENTS AND COMPENSATION

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| 121. Who paid you to conduct this audit? | <input checked="" type="radio"/> The audited facility or its parent agency <input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) <input type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm) <input type="radio"/> Other |
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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.

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| 115.11 | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1474 600" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners – Prison Rape Elimination Act (PREA) • Local Operating Procedure (OP) ECF- 03.03.140 • MDOC Prison Rape Elimination Act (PREA) Manual • Director’s Office Memorandum (2017-12) • MDOC Organizational Chart which indicates that the PREA Administrator reports directly to the Administrator, State Office Administrator 17 • Position Descriptions • Interview with the PREA Manager • Interview with the PREA Coordinator <p data-bbox="242 629 459 658">Analysis/Reasoning</p> <p data-bbox="242 687 1493 848">PD 03.03.140 serves to establish the agency’s zero tolerance policy and outline the agency’s approach to implementing the PREA standards. PD 03.03.140 and the PREA Manual outline the agency approach to implementing the zero-tolerance policy. Local Operating Procedures (OP ECF) 03.03.140 outlines the facility’s approach to implementing practices covered by the agency policy and the agency PREA Manual. This Auditor reviewed these documents in their entirety to determine compliance with provision (a).</p> <p data-bbox="242 878 1493 972">The agency PREA Manual is a document that serves to unify the agency’s approach to implementing the PREA standards, in detail, that were previously covered by a network of policies relative to such areas as segregation, employee training, inmate placement, health care, etc.</p> <p data-bbox="242 1001 1493 1263">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 inmates, 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, inmate 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.</p> <p data-bbox="242 1292 1493 1420">The Department’s PREA Manager oversees and coordinates the efforts of the MDOC to comply with Federal PREA Standards including development and implementation of policy, staff training and prisoner education. The Department PREA Manager coordinates the collection of data, and the preparation for each three-year cycle of audits required by the standards.</p> <p data-bbox="242 1449 1493 1711">In response to the standards, each correctional facility has assigned a PREA Coordinator with sufficient time and authority to coordinate the facility’s efforts in order to comply with the standards. The time required for this position will vary depending on the facility’s level of compliance at any time. It is expected that the initial compliance period/audit cycle may be the most time intensive as each PREA Coordinator becomes established in the position and the Department works to achieve compliance in all areas of the standards. The PREA Coordinator is responsible to monitor and provide assistance regarding the facility’s PREA compliance, in areas such as staff training; prisoner education; reporting, documentation and investigation of PREA-related allegations; staffing plans; operating procedures; and, audit preparation. They may serve as members of incident review teams and serve as a contact for persons outside the Department on issues related to PREA requirements</p> <p data-bbox="242 1740 376 1769">Conclusion:</p> <p data-bbox="242 1774 1474 1868">Based on auditor’s analysis of related policy, review of executive memorandums, review of agency and facility organization charts, and formal staff interviews it is determined that Oaks Correctional Facility satisfies all elements required of this standard.</p> |

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- MDOC Prison Rape Elimination Act (PREA) Manual
- Agreement between MDOC/Eaton County and Eaton County Sheriff's Office/Westside Residential Alternative to Prison (WRAP)
- Agreement between MDOC/Ingham County and Ingham County Sheriff's Office/Intensive Detention Reentry Program (IDRP)
- Interviews with Staff

Analysis/Reasoning

According to the MDOC PREA Manual, the Department shall include in any new contract or contract extension, pertaining to the confinement of offenders, the obligation for the contractor to adopt and comply with the PREA Standards. The Department shall provide contract monitoring for any new contract or contract extension listed above to ensure the contractor is complying with the PREA Standards.

The Department, or another governmental entity on behalf of the Department, shall not enter into or renew any collective bargaining agreements that:

- (1) Limits the Department's ability to remove alleged staff sexual abusers from contact with prisoners pending the outcome of an investigation ;
- (2) Imposes a standard higher than preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated;
- (3) Limits the determination of whether and to what extent discipline is warranted;
- (4) Prohibits disciplinary sanctions up to and including discharge for violating Department Work Rule #50 "Overly-Familiar or Unauthorized Contact," #51 "Sexual Conduct with Offender," or #52 "Sexual Harassment of Offender," with discharge being the presumptive disciplinary sanction for staff who engage in sexual abuse;
- (5) Prohibits disciplinary sanctions that are not consistent for circumstances that are similarly situated;
- (6) Prohibits referral to law enforcement and relevant licensing bodies, regardless of whether the staff member resigned.

Agreement between MDOC/Eaton County and Eaton County Sheriff's Office/Westside Residential Alternative to Prison (WRAP): This Agreement is made pursuant to the Urban Cooperation Act of 1967, MCL 124.501, et seq., and entered effective January 1, 2018, by and between the State of Michigan, Michigan Department of Corrections, hereafter referred to as the STATE, and Eaton County and the Eaton County Sheriff's Office, 1025 Independence Blvd., Charlotte, MI 48813, hereafter referred to as the CONTRACTOR. In consideration of the mutual promises, covenants and representations herein contained, the parties agree as follows: Statement of Purpose: Whereas the STATE wants to house male probation violators (Violators) for participation in Westside Residential Alternative to Prison (WRAP) program, the purpose of this Agreement is to reserve 60 jail beds at the Eaton County Jail for up to a 180-day period to house Violators. There is no guarantee that the CONTRACTOR's beds will be filled at 100% capacity.

The STATE will determine which Violators, and the number of Violators, to be placed with the CONTRACTOR. This Agreement sets forth the terms and conditions of this undertaking. Over familiarity with Violators is strictly prohibited. The CONTRACTOR and the CONTRACTOR Personnel shall comply with the Final Rule of the Prison Rape Elimination Act (PREA) of June 20, 2012 (Federal Law 42 U.S.C. 15601) and all applicable PREA standards (Attachment A) and the agency's policies. The CONTRACTOR and CONTRACTOR Personnel shall make itself familiar with and at all times shall observe and comply with all PREA regulations which in any manner affect the performance under this Contract. The CONTRACTOR must subject itself to a Department of Justice (DOJ) PREA Audit at least once every three (3) years beginning August 20, 2013 and will be solely responsible for paying for a PREA Audit as required by this contract. Failure to comply with the PREA standards and related policies of the STATE will be considered a breach of contract and may result in termination of the contract.

CONTRACTOR Personnel who may have contact with prisoners must complete PREA training Program A -Correctional Facilities Administration (CFA) Security Regulations prior to entrance in any Michigan Department of Corrections (MDOC) Facility. Upon completion, Contractor Personnel shall submit a signed memorandum to the Contract Administrator documenting completion of the training and date of completion.

As deemed necessary, the STATE Contract Monitor, or STATE Program Manager will provide the CONTRACTOR with current copies of all PREA documents via email. Any revisions to the documents will be emailed to the CONTRACTOR throughout the contract period, and the CONTRACTOR shall comply with all documentation provided.

Agreement between MDOC/Ingham County and Ingham County Sheriff's Office/Intensive Detention Reentry Program (IDRP): This Agreement is made pursuant to the Urban Cooperation Act of 1967, MCL 124.501, et seq., and entered into effective October 1, 2017 by and between the State of Michigan, Michigan Department of Corrections, hereafter referred to as the STATE, and Ingham County and the Ingham County Sheriff's Office, 630 N. Cedar St, Mason, MI 48854, hereafter referred to as the CONTRACTOR.

In consideration of the mutual promises, covenants and representations herein contained, the parties agree as follows:
STATEMENT OF PURPOSE: Whereas the STATE wants to house male parole violators (Violators) for participation in Intensive Detention Reentry Program (IDRP), the purpose of this Agreement is to reserve 50 jail beds at the Ingham County Jail for up to a 45-day period to house Violators. There is no guarantee that the CONTRACTOR's beds will be filled at 100% capacity. The STAIB will determine which Violators, and the number of Violators, to be placed with the CONTRACTOR. This Agreement sets forth the terms and conditions of this undertaking.

Overfamiliarity with Violators is strictly prohibited. In addition, the Contractor must comply with the Federal Prison Rape Elimination Act (PREA), 28 CFR Part 115. The Contractor must immediately refer any allegations of sexual abuse or sexual harassment made by a Violator to the STATE's on-site Agent. The Contractor shall ensure compliance with the National Standards to Prevent, Detect and Respond to Prison Rape, effective August 20, 2012. See attached PREA standards. If the Contractor does not abide by these standards, it is considered a breach of contract of this Agreement.

The CONTRACTOR shall report any observed sexual abuse/sexual harassment of a Violator or allegations of sexual abuse/sexual harassment of a Violator to the STATE's on-site Agent and the STA 1E Program Manager immediately, the same day the allegation or observation is made.

As deemed necessary, the State Contract Monitor or State Program Manager will provide the CONTRACTOR with current copies of all PREA documents via email. Any revisions to the documents will be emailed to the CONTRACTOR throughout the contract period, and the CONTRACTOR must comply with all documentation provided.

The Procurement, Monitoring and Compliance Division (PMCD) within the Michigan Department of Corrections (MDOC) oversees the MDOC's contracts and will ensure that the CONTRACTOR is delivering services according to the contract requirements. The STATE Contract Manager or designee will serve as the lead for all contract related issues and will assist in facilitating kick-off meetings, determining service level agreements, overseeing the transition timeline and working with the MDOC program staff to ensure the contractual requirements are being met. The STATE Contract Monitor assigned to monitor this Agreement will conduct regular monitoring of all contract related activities.

Conclusion:

Based on review of contracts and interviews staff MDOC and ECF meets this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- MDOC Prison Rape Elimination Act (PREA) Manual (Staffing Plan)
- Policy Directive (Exempt) 04.04.100 Custody, Security, and Safety Systems (Exempt)
- Staffing Plan January 4, 2022
- Deviation Memorandum
- PREA Annual Staffing Review
- Officer Location/Round Reader
- Interview with Warden
- Interview with PREA Coordinator
- Interviews Lt. Mackay
- Interviews with supervisors who conduct unannounced rounds

Analysis/Reasoning

Staffing Plan

In calculating adequate staffing levels and determining the need for video monitoring for MDOC prisons, the Department shall take into consideration:

- (1) Generally accepted detention correctional safety and security practices;
- (2) Any judicial findings of inadequacy;
- (3) Any findings of inadequacy from federal investigative agencies;
- (4) Any findings of inadequacy from internal or external oversight bodies;
- (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or prisoners may be isolated);
- (6) The composition of the prisoner population;
- (7) The number and placement of supervisory staff;
- (8) Institution programs occurring on a particular shift;
- (9) Any applicable state or local laws, regulations, or standards;
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (11) Any other relevant factors.

In calculating adequate staffing levels and determining the need for video monitoring for Detroit Reentry Center, the Department shall take into consideration:

- (1) The physical layout of the facility;
- (2) The safety and security of the facility;
- (3) The composition of the prisoner population;
- (4) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (5) Any other relevant factors.

For both MDOC prisons and Detroit Reentry Center, at least annually the Warden/Administrator and PREA Coordinator shall assess, determine and document whether adjustments are needed to:

- (1) 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.

The review shall be documented on the appropriate PREA Annual Staffing Plan Review form. The form shall be maintained by the facility with a copy forwarded to the PREA Manager. In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.

Staff shall conduct and document rounds in accordance with PD 04.04.100 "Custody, Security, and Safety Systems (EXEMPT)." In addition, each Warden, Deputy Warden, Inspector, Captain, and Lieutenant shall conduct and document rounds for PREA audit purposes. Staff are prohibited from alerting other staff members when supervisory rounds are occurring unless such announcement is related to the legitimate operational functions of the facility.

Policy Directive (Exempt) 04.04.100 Custody, Security, and Safety Systems (Exempt)

ROUNDS AND INSPECTIONS

The purpose for conducting rounds is to ensure daily visibility of staff, increase the safety of staff and prisoners, and ensure the security of the facility. This will allow for observation of facility operations and conditions, monitoring of the well-being of prisoners and staff, and provide prisoners and staff with the opportunity for informal access to administrators. While

conducting rounds, staff shall physically walk all areas of their designated assignment conducting a complete and thorough assessment to identify unusual activity and safety, security, policy, and procedural violations. Staff shall take necessary, timely, and appropriate action to address any unusual activity or violations. If staff are unable to resolve an issue brought to their attention during rounds (e.g., staff or prisoner concerns, faulty, unsafe, or dirty conditions) s/he shall report the issue in writing through the appropriate chain of command to the Deputy Warden no later than the end of the shift. However, telephone contact shall be initiated if an urgent situation is discovered. If a potential problem or concern is identified, the Warden or designee shall ensure an inspection or investigation, as appropriate, is conducted.

During rounds, administrative staff shall conduct random inspections of specific items or areas identified in the facility inspection schedule. All rounds not recorded by an electronic rounding device and all inspections shall be logged.

ADMINISTRATIVE ROUNDS

The purpose of administrative rounds is to allow administrative staff the ability to observe day-to-day operations of staff, the overall conditions of the facility, and to promote the visibility of supervisors and management throughout the facility.

Administrative rounds shall be conducted in accordance with Paragraphs VV - CCC. (VV) Wardens shall make rounds inside their institution at least monthly on each shift. (CCC) Staff are prohibited from alerting other staff members that unannounced supervisory rounds are occurring unless such an announcement is related to the legitimate operational functions of the facility.

Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates is 1005. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates on which the staffing plan was predicated 1108. Per the deviation memo, the most common reasons that Oaks Correctional facility- ECF deviates from the staffing plan are due to medical emergencies, critical incidents, sick leave, and transportation runs. When deviations are necessary, the safety and security of the institution is held at the highest priority. At no time would Oaks Correctional Facility- ECF ever go under minimum staffing requirements for housing units or other essential assignments.

Conclusion:

The Auditor concluded the facility has an adequate staffing plan to ensure the protection of offenders from sexual abuse. The staffing plan is reviewed in accordance with this standard. The Auditor reviewed policies, procedures, annual PREA report, round readers, and unannounced rounds, interviewed staff and made observations to determine the facility meets the requirements of this standard.

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| 115.14 | Youthful inmates |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • MDOC Prison Rape Elimination Act (PREA) Manual • Policy Directive 05.01.140 Prisoner Placement and Transfer • Oaks Correctional Facility Web-site • Policy Directive 03.02.120 Youthful Trainees • Interviews Warden, PREA Manager and PREA Coordinator <p>Analysis/Reasoning</p> <p>PD 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.</p> <p>Conclusion</p> <p>During the audit tour and through interviews with the Warden, PREA Manager, PREA Coordinator, it was observed that the ECF does not house youthful offenders and is therefore compliant with provisions (a) (b) and (c) of the standard.</p> |

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| 115.15 | Limits to cross-gender viewing and searches |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • The Code of Criminal Procedure (Excerpt) MCL 764.25-Body Cavity Search • MDOC Prison Rape Elimination Act (PREA) Manual • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct involving Prisoners • Policy Directive 04.04.110 Search and Arrest in Correctional Facilities • Policy Directive 04.06.184 Gender Dysphoria • Oaks Correctional Facility Web-Site Information • Training Personal Searches Instructor’s Module (January 2018) • Privacy Notice • Knock and Announce Sign • MDOC CBT Sexual Abuse and Sexual Harassment in Confinement • Custody and Searches in Corrections (part 2) • Interviews • Random Staff • Random Inmates <p>Analysis/Reasoning</p> <p>THE CODE OF CRIMINAL PROCEDURE (EXCERPT) Act 175 of 1927</p> <p>764.25b Body cavity search</p> <p>(3) Subsection (2) does not apply to a body cavity search of a person who is any of the following: (a) A person serving a sentence for a criminal offense in a detention facility or a state correctional facility housing prisoners under the jurisdiction of the department of corrections, including a youth correctional facility operated by the department of corrections or a private vendor under section 20g of 1953 PA 232, MCL 791.220g.</p> <p>(4) If any of the circumstances described in subsection (3)(a), (b), or (c) applies, a search of a body cavity shall not be conducted unless the person conducting the search has obtained prior written authorization from the chief administrative officer of the facility or from that officer’s designee. (5) A body cavity search shall be conducted by a licensed physician or a physician’s assistant, licensed practical nurse, or registered professional nurse acting with the approval of a licensed physician. If the body cavity search is conducted by a person of the opposite sex as the person being searched, the search shall be conducted in the presence of a person of the same sex as the person being searched.</p> <p>MDOC PREA Manual</p> <p>Body Cavity Searches – In accordance with PD 04.04.110 “Search and Arrest in Correctional Facilities” and MCL 764.25b, visual body cavity searches (meaning a search of the anal or genital opening) shall be performed by medical practitioner/staff. The medical practitioner who performs the body cavity search need not be the same sex as the prisoner being searched. However, there shall always be at least one additional staff member present who is of the same sex as the prisoner. If additional staff is present, they must be of the same sex as the prisoner.</p> <p>Policy Directive 03.03.140</p> <p>CC. For facilities housing male offenders, female employees must announce their presence each time they enter a prisoner housing unit. Employees must knock on the most interior door and announce in a loud clear voice, “female(s) in the area” before entering.</p> <p>DD. For facilities housing female offenders, male employees must announce their presence each time they enter a prisoner housing unit. Employees must knock on the most interior door and announce in a loud clear voice, “male(s) in the area” before entering. Also, at facilities housing female offenders, employees shall follow procedures outlined in WHV OP 03.03.140 “Prohibited Sexual Conduct Involving Prisoners.”</p> <p>PD 04.04.110- Pat-down, Clothed Body, and Cell/Room Searches</p> <p>For male prisoners, these searches need not be conducted by a staff member of the same sex as the prisoner being searched. Pat-down and clothed body searches of female prisoners shall be conducted only by female staff except when female staff are not readily available to conduct a search in an emergency except 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.</p> <p>Strip Search</p> |

Z. A strip search shall be performed only by employees of the same sex as the prisoner being searched. A strip search also shall be performed only in the presence of employees of the same sex as the prisoner being searched except that it may be conducted in the presence of a supervisory employee of the opposite sex when a supervisor's presence is required by policy and a supervisor of the same sex as the prisoner being searched is not available.

BB. A written report identifying the employees involved in a strip search and the reason for the search shall be submitted to the Warden by the end of the shift after which the search occurred. If the search was performed by or in the presence of an employee of the opposite sex as the prisoner being searched, the reason it was performed by that employee also shall be included in the report.

Body Cavity Search

CC. (2) The search must be conducted by a licensed physician, physician's assistant, or nurse practitioner. (3) Medical personnel who perform a body cavity search need not be of the same sex as the prisoner being searched. However, all other persons who are present during the search shall be of the same sex as the prisoner and there always shall be at least one staff member present who is the same sex as the prisoner being searched. (5) A written report of the search shall be completed as soon as possible but not later than the end of the shift after which the search occurred. The Strip Search/Body Cavity Search Report (CAJ-289) shall be used for this purpose. The original report shall be sent to the Warden.

Policy Directive 04.06.184 Gender Dysphoria

I. 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 in private by a medical practitioner.

Training Personal Searches Instructor's Module

H. All searches are to be recorded on the Daily Prisoner Shakedown Report Form (CSJ-468) and in the appropriate logbook.

1. The prisoner's last name, number, lock, time and date of search and correctional officer's last name will be recorded in the logbook.

I. A prisoner may be subjected to a strip search whenever it is determined by staff that such a search is necessary.

All prisoners shall be subject to a strip search after each contact visit and that search shall include a visual inspection of the entrance to the rectal cavity.

J. A strip search shall be performed only by employees of the same sex as the prisoner being searched, except:

1. In an emergency situation where members of the same sex as the prisoner being searched are not readily available.

K. A strip search also shall be performed only in the presence of employees of the same sex as the prisoner being searched, except:

1. It may be conducted in the presence of a supervisory employee of the opposite sex whose presence is required by policy and a supervisor of the same sex as the prisoner being searched is not readily available.

L. A written report identifying the employees involved in the strip search and the reason for the search shall be submitted to the Warden by the end of that shift after which the search occurred. If the search was conducted by or in the presence of an employee of the opposite sex the reason should be noted in the report.

The report is not required for the following routine strip searches if they were NOT performed by or in the presence of an employee of the opposite sex:

1. Upon admission to segregation housing unit;
2. Prior to departure or upon arrival at a facility on an inter-institutional transfer;
3. Upon arrival from a jail or arrival at an RRP facility;
4. Prior to departure or upon return to a facility from an off-site detail or an assignment which requires strip search (e.g. Prison Industries);
5. When a prisoner housed in a lower level of custody enters a higher custody level unit or section of the facility for any reason;
6. When a prisoner is required to remove clothing as a routine part of the procedure for taking a urine sample;
7. Following a contact visit.

N. Body Cavity searches will only be conducted with written authorization from the warden and shall be conducted only by a licensed physician or a physician's assistant, licensed practical nurse, or registered nurse acting with the approval of a licensed physician.

Privacy Notice signs, Knock and Announce signs displayed at entrances to the housing units. Opposite gender staff announcements were made on all housing unit tours to ensure privacy.

Conclusion

Agency policy includes all requirements of the PREA standard. The agency PAQ reports 0 cross-gender strip or cross-

gender visual body cavity searches of inmates in the last 12 months and 0 cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff. Females are not housed at Oaks Correctional Facility. This is a male facility.

One hundred percent (100%) of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs (the percentage given does not necessarily indicate compliance or non-compliance with the standard).

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| 115.16 | Inmates with disabilities and inmates who are limited English proficient |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners
- MDOC Prison Rape Elimination Act (PREA) Manual
- Michigan Braille Transcribing Fund
- American Language Services and Global Interpreting Services LLC
- Deputy Director Language Services Memo
- Bi-Lingual Informed Consent Poster and Privacy Notice Sign
- Just Detention International Poster
- Prisoner Guide Book
- Interviews:
 - Agency Head
 - Random Staff
 - Random Inmates

Analysis/Reasoning**Policy Directive 03.03.140 PREA**

GG. The PREA Manager is responsible for development and distribution of educational materials related to the education of prisoners regarding the Department's zero tolerance for sexual abuse and sexual harassment of prisoners, how to report conduct or threats prohibited by this policy, and prisoners' right to be free from retaliation for reporting or participating in a related investigation. Educational materials shall include information on treatment, advocacy, and counseling services available to all prisoners.

MDOC Prison Rape Elimination Act (PREA) Manual

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. Prisoner education materials will be distributed by the Department's PREA Manager. 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.

The PREA Manual, along with training materials, were reviewed by this Auditor in determining compliance with provision (a) of the standard. The agency also produces a PREA specific brochure in Spanish, as well as publishing its Prisoner Guidebooks in Spanish. A braille version of the PREA pamphlet was created for blind inmates and a sign language interpreting service is available.

The agency head's designee confirmed that the agency takes significant steps to ensure that materials are provided in various formats to include captioning of the PREA inmate video in multiple languages, including Spanish.

Posters displaying PREA reporting information were observed to be posted in each housing unit in English and Spanish. The facility provides its Prisoner Guidebook in both English and Spanish. The agency publishes a Spanish version of its PREA brochure. Privacy signs are translated in Spanish and were observed during the audit tour. This Auditor reviewed translation invoices from the facility to confirm that the facility has an active interpretation services account to reach LEP inmates. The facility provided a Purchase Order for interpretation services with Global Interpreting Services, LLC and American Language Services dated October of 2021 that this Auditor reviewed in determining compliance with provisions (a) and (b) of the standard.

PD 03.03.140 and PREA Manual prohibits the use of inmate interpreters and were reviewed in determining compliance with provision (c). During random interviews with custody staff and informal interviews with line staff during the audit tour, staff appeared to understand that the use of an inmate interpreter for complaints of sexual abuse was only acceptable under the circumstances where a delay could compromise an effective response.

In the past 12 months, there were two (2) number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations.

Conclusion:

Based on a review of the policy directives, the PAQ, MDOC PREA Manual, Language Interpreters Services information, and observations made during the tour to include the PREA signage as well as interviews with the Agency Head designee, random staff, and random prisoners indicates that this standard appears to be compliant.

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| 115.17 | Hiring and promotion decisions |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="240 327 759 555" style="list-style-type: none"> • Policy Directive 02.06.111 Employment Screening • MDOC PREA Manual • Corrections Officer Recruitment Flyer • Corrections Supervisor Application • Employee Handbook • Interviews: Administrative (Human Resources) Staff <p data-bbox="240 584 459 611">Analysis/Reasoning</p> <p data-bbox="240 640 517 667">Policy Directive 02.06.111</p> <p data-bbox="240 696 1477 891">G. The Department shall not knowingly hire any new employee, promote any existing employee or enlist the services of any contractor who has contact with offenders and has: 1. 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. Been convicted of engaging in, attempting to engage in or conspiracy to engage in sexual activity 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. Been civilly or administratively adjudicated to have engaged in the activity described in number 2 above.</p> <p data-bbox="240 920 1485 1384">X. Once every three years criminal history checks shall be processed through LEIN for all MDOC employees. However, this does not preclude the MDOC from conducting a LEIN check at any time within the three-year period, if determined necessary. The three-year criminal history checks shall be completed during the month of June. The criminal history checks shall be documented and include a review for personal protection orders and domestic violence offenses. Any information produced from the criminal history check that has not been previously reported or investigated shall be referred by the reviewing staff for investigation. Criminal history checks shall be completed by facility Records Office Supervisors for all staff who work at a correctional facility. However, at the Charles E. Egeler Reception and Guidance Center (RGC), the Warden shall determine which staff will complete the criminal history checks. Grandview Plaza and FOA staff who do not work at a correctional facility shall have a criminal history check processed through LEIN by the assigned Human Resource Office. After the LEIN results are reviewed by the appropriate Administrator, any potential criminal activity that is discovered as a result of the criminal history check shall be reported to the Office of Internal Affairs. Y. Contractors and contractor's employees who have contact with prisoners at CFA facilities shall have an annual criminal history check processed through LEIN. This does not include contractors and contractor's employees who have incidental contact with prisoners. The criminal history check shall be completed by staff as determined by the CFA Deputy Director or designee.</p> <p data-bbox="240 1413 1441 1476">Omissions regarding the reporting of such misconduct, or the provision of false information, are grounds for discharge in accordance with the Employee Handbook.</p> <p data-bbox="240 1505 469 1532">Employee Handbook</p> <p data-bbox="240 1561 1473 1691">33. REPORTING VIOLATIONS Employees shall immediately report behavior which is in violation of Departmental rules, policies, procedures, work statements or post orders, etc., to supervisory staff. Failure to report conduct involving drugs, escape, sexual misconduct, sexual harassment, workplace safety or excessive use of force will aggravate the penalty up to and including discharge.</p> <p data-bbox="240 1720 467 1747">MDOC PREA Manual</p> <p data-bbox="240 1776 1490 1971">Criminal Background Checks In accordance with PREA standards and PD 02.06.111 "Employment Screening", criminal history checks shall be processed through LEIN for all employees, including contractors and contractor's employees, who have contact with prisoners or parole violators at CFA Correctional Facilities and Lake County Residential Reentry Facility no less frequent than once every five years. Criminal background checks shall also be conducted for all facility volunteers. Any information produced from a criminal background check that has not been previously reported or investigated, shall be referred to the appropriate staff for investigation.</p> <p data-bbox="240 2000 443 2027">Human Resources</p> <p data-bbox="240 2056 1485 2152">Hiring New Employees Before hiring new employees who may have contact with prisoners, the Department shall: (1) Perform a criminal background records check regarding criminal convictions; and (2) Consistent with federal, state, and local law, make its best efforts to conduct a background investigation regarding discipline and employer substantiated allegations</p> |

of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. The Department shall not knowingly hire anyone who may have contact with prisoners and:

(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 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).

Conclusion

In the past 12 months, there were 42 number of persons hired who may have contact with inmates who have had criminal background record checks. In the past 12 months, there were 13 number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates.

Interviews conducted with Human Resources Manager combined with the body of documents reviewed validate the protocols identified in above narrative are followed at ECF finding compliance with this standard.

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| 115.18 | Upgrades to facilities and technologies |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • MDOC PREA Manual • CAH-135 Project Review and Application • Interviews • Observations <p>Analysis/Reasoning</p> <p>MDOC PREA Manual (Facility and Technology Upgrades)</p> <p>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. 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.</p> <p>Conclusion</p> <p>Oaks Correctional Facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since their last PREA audit. ECF meets provisions of this standard.</p> |

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| 115.21 | Evidence protocol and forensic medical examinations |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1062 696" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA • Policy Directive 03.04.100 Health Services • MDOC PREA Manual • Michigan State Policy letter regarding criminal investigations • Basic Investigator Training Packet • MDOC Crime Scene Management and Preservation (2015) • CAJ-1020 Forensic Examination Form • Deputy Director Memo (Victim Advocates and Training) • Email (re: availability of VA's for prisoners) • List of Facility Trained Advocates • Training Record (Victim Advocates) • Interviews <p data-bbox="242 730 459 757">Analysis/Reasoning</p> <p data-bbox="242 786 520 813">Policy Directive 03.03.140</p> <p data-bbox="242 844 903 871">INVESTIGATION OF SEXUAL ABUSE/SEXUAL HARASSMENT</p> <p data-bbox="242 902 1474 996">CCC. Investigations of sexual abuse/sexual harassment shall only be completed by employees who have received specialized investigator training as outlined in the PREA Manual. All investigations shall be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment Investigations portion of the PREA Manual.</p> <p data-bbox="242 1028 1482 1122">DDD. Unless a prisoner cannot be safely housed at the facility, employees shall work to avoid transferring prisoners if they are the alleged victim, perpetrator, or witness in a pending PREA related investigation. If a prisoner is transferred prior to the completion of an investigation, the facility shall document the rationale for the transfer.</p> <p data-bbox="242 1153 1493 1413">EEE. Wardens shall ensure that information on all allegations of prisoner-on-prisoner sexual abuse/sexual harassment, employee sexual abuse/sexual harassment, and employee overfamiliarity are entered into the MDOC computerized database at their respective facilities and investigated. In addition, information on the outcome of each investigation shall be entered. Information on allegations that do not result in sustained rule violations shall not be retained in an employee's Personnel file or used for any purpose not authorized by this or any other policy directive. Only the Deputy Director and their employees involved in employee disciplinary proceedings, including the Internal Affairs Section, the PREA Manager and their employees, and other employees specifically authorized by the Director or designee, shall have access to information in AIM.</p> <p data-bbox="242 1444 1493 1570">FFF. In all investigations of employee sexual abuse/sexual harassment, investigators shall personally interview the complainant, the alleged victim if not the complainant, the alleged perpetrator, and sufficient witnesses to establish the facts. The investigation shall not be closed simply due to the resignation, transfer, or termination of the accused employee. Prisoner on Prisoner Sexual Abuse</p> <p data-bbox="242 1601 1485 1830">GGG. All reported allegations of prisoner-on-prisoner sexual abuse or threats of such behavior, whether reported verbally or in writing, shall be referred to the Warden or designee, or in FOA, to the Assistant Deputy Director (ADD) of the Office of Parole and Probation Services or designee, for investigation. The assigned investigator shall personally interview the alleged victim, the alleged perpetrator, and sufficient witnesses to establish the facts, unless otherwise directed by the investigating law enforcement agency. The investigation shall be coordinated as necessary with the Hearing Investigator if misconduct charges are issued. Investigators shall review prior complaints and reports of sexual abuse involving the same suspected perpetrator.</p> <p data-bbox="242 1861 1490 2022">HHH. Any allegation(s) that appear to be criminal shall be referred to the MSP or other appropriate law enforcement agency to be criminally investigated and referred for prosecution. The Department investigation shall be coordinated as necessary with the investigating law enforcement agency to ensure the Department's efforts will not be an obstacle for prosecution and to remain informed of the status of the investigation. However, the Department investigation shall proceed in accordance with PD 01.01.140 "Internal Affairs" regardless of whether the referral results in criminal prosecution.</p> <p data-bbox="242 2054 963 2080">Employee Sexual Abuse/Harassment and Employee Overfamiliarity</p> <p data-bbox="242 2087 1465 2145">III. All reported allegations of employee sexual abuse/sexual harassment or employee overfamiliarity, whether reported verbally or in writing, shall be referred for investigation as set forth in PD 02.03.100 "Employee Discipline" or PD 01.01.140</p> |

"Internal Affairs," as appropriate. Any allegation(s) that appear to be criminal shall be referred to the MSP or other appropriate law enforcement agency to be criminally investigated and referred for prosecution. The Department investigation shall be coordinated as necessary with the investigating law enforcement agency to ensure the Department's efforts will not be an obstacle for prosecution. However, the Department investigation shall proceed in accordance with PD 01.01.140 "Internal Affairs" and PD 02.03.100 "Employee Discipline" regardless of whether the referral results in criminal prosecution.

JJJ. The Warden shall ensure the alleged victim is notified in writing of the final disposition of an investigation involving allegations of sexual abuse. The PREA Prisoner Notification of Sexual Abuse Investigative Findings and Action Form (CAJ-1021) shall be used for this purpose once the final reviewer has made their determination of findings. The alleged victim shall sign for receipt of the notification. The CAJ-1021 shall be retained as part of the investigative packet.

KKK. If an investigation of employee sexual abuse/harassment determines the allegations are substantiated, the facility conducting the investigation shall inform the victim of the following using the CAJ-1021: 1. Any disciplinary action is taken. However, details of the discipline, including specific charges and sanctions shall not be provided; 2. The employee is no longer assigned within the prisoner's unit; 3. The employee is no longer employed at the facility; 4. The Department learns the employee has been indicted on a charge related to sexual abuse within the facility, or; 5. The Department learns that the employee has been convicted on a charge related to sexual abuse within the facility.

LLL. If a prisoner alleges they were sexually abused by another prisoner, the Department shall subsequently inform the alleged victim of the following using the CAJ-1021: 1. The Department learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility. 2. The Department learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

MMM. An incident-review meeting shall be conducted within 30 days of the completed investigation of sexual abuse, unless that investigation determined the allegation was unfounded. The meeting shall be documented using the Prison Rape Elimination Act (PREA) Sexual Abuse Incident Review (CAJ-1025).

NNN. For each investigation that substantiates an allegation of sexual abuse or sexual harassment of prisoners, the Warden shall ensure that a completed United States Department of Justice Survey on Sexual Victimization Form (SSV-IA) and all relevant documents are attached to the investigation packet and sent to the PREA Manager and appropriate PREA Analyst.

OOO. With approval of the Warden or designee, a prisoner may be charged with the misconduct of "Interference with the Administration of Rules" if after investigation allegations of employee sexual abuse/harassment are determined to be made in bad faith. The misconduct may be elevated to Class I with the approval of the CFA Deputy Director or designee. Hearings shall be conducted in accordance with PD 03.03.105 "Prisoner Discipline."

PPP. Retaliation for reporting or participating in an investigation is prohibited. Prisoners and employees who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, are protected from retaliation for reporting the incident or participating in the investigation. Upon receiving an allegation of sexual abuse, designated employees shall initiate a PREA Sexual Abuse Retaliation Monitoring form (CAJ-1022) to be completed in accordance with the PREA Manual. Employees or prisoners who report sexual abuse, or a prisoner who is an alleged victim of sexual abuse, shall be monitored for retaliation for a period of at least 90 days, unless the investigation results in a finding of unfounded. If unfounded, retaliation monitoring may be discontinued, and the reason noted on the form.

Policy Directive 03.04.100

BBB. A prisoner, who is alleged to have been sexually abused less than 96 hours previously and where forensic evidence may be present, shall be transported to a local hospital for a forensic medical examination. A victim advocate shall be made available in accordance with Paragraphs FFF - KKK. Prisoner victims of sexual abuse shall be provided treatment services without financial cost to the prisoner.

CCC. 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.

MDOC PREA Plan

Criminal and Administrative Investigations When receiving an allegation of sexual abuse or sexual harassment, staff shall ensure all allegations are referred to the appropriate law enforcement agency in accordance with policy and law for criminal investigation in conjunction with the Department's administrative investigation. Referrals to law enforcement shall be documented in the Department's investigative report, PREA investigation worksheet(s) and pertinent computerized database entry(ies).

MDOC Crime Scene Management and Preservation

According to the agency's Crime Scene Management and Preservation Trainers Manual and an interview with the PREA Manager, the PREA Coordinator, the agency's crime scene preservation is predicated upon the United States Army Criminal Investigation Command.

During interviews with facility medical staff and an investigator (Lieutenant), it was reported that the facility is not responsible for collecting forensic evidence from those involved in criminal sexual abuse investigations. Inmates are transported to SAFE/SANE examiners in the/any clothing worn during an alleged incident of sexual abuse. The agency's protocol, which is outlined in the PREA Manual and Crime Scene Management and Preservation Trainers 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, Michigan State Police (MSP), to maximize the collection of available evidence within the crime scene.

Through random staff interviews and informal interviews during the audit tour, it was apparent to this Auditor that security staff are aware of their responsibility to secure any potential crime scene and their duty to ensure those involved do not take actions that could destroy evidence. Crime Scene Management and Preservation training materials cover the necessary technical detail to aid first responders in preserving available evidence.

Uniform evidence protocol is covered in Crime Scene Preservation and Management and Preservation Trainers Manual. The manual was reviewed by this Auditor in determining compliance with provision (b) of the standard. Training materials cover the necessary technical detail to aid first responders in preserving available evidence. Youthful inmates are not housed at this facility; however, staff are adequately prepared to address the needs of this population through training materials and the PREA Manual's guidance. Random staff interviews confirm that potential first responder security staff are aware of their responsibilities to protect any applicable crime scene and ensure that those involved take no action to destroy physical evidence. According to the agency's Crime Scene Management and Preservation Trainers Manual, the agency's crime scene preservation is predicated upon the United States Army Criminal Investigation Command.

Conclusion

There were (0) number of forensic medical exams conducted during the past 12 months; (0) number of exams performed by SANEs/SAFEs during the past 12 months; (0) number of exams performed by a qualified medical practitioner during the past 12 months.

Policy supports the requirements of the provisions. Processes are in place to ensure an incarcerated individual is sent to a hospital for a SANE exam when allegations are made to support a referral. State law and policy support that a qualified advocate is available through the hospital. Several of the agency trained investigators have become certified for evidence collection and photographing of crime scenes, above and beyond the specialized training required of investigators (certificates provided to the auditor) therefore ensuring a uniform accurate evidence protocol is followed. For this reason, the auditor finds that the facility meets the standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA
- Policy Directive 01.01.140 Internal Affairs
- MSP (Michigan State Police) PREA Procedure Manual
- Michigan State Policy letter regarding criminal investigations
- Web Page Internal Affairs Policy Directive 01.01.140
- Web Page PREA Policy 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA
- Interviews

Analysis/Reasoning

Policy Directive 03.03.140

EEE. Wardens shall ensure that information on all allegations of prisoner-on-prisoner sexual abuse/sexual harassment, employee sexual abuse/sexual harassment, and employee overfamiliarity are entered into the MDOC computerized database at their respective facilities and investigated.

Policy Directive 01.01.140

CASES WITHIN THE JURISDICTION OF INTERNAL AFFAIRS

H. Internal Affairs has jurisdiction to investigate all allegations of employee and offender misconduct. Allegations of prisoner-on-prisoner sexual abuse and any unexpected offender death which may be the result of a suicide or attempted suicide, a drug overdose, a homicide, or an accident shall be immediately reported to the Internal Affairs Manager, in addition to reporting as required by applicable policy directives.

REFERRAL OF CASES TO INTERNAL AFFAIRS

I. The worksite administrator or designee shall enter all allegations of employee work rule violations, including Prison Rape Elimination Act (PREA) and discriminatory harassment complaints, into AIM within two business days of receipt unless extenuating circumstances apply.

PROCESSING AND INVESTIGATION

L. All allegations regarding discriminatory harassment, including sexual harassment, shall be processed in accordance with PD 02.03.109 "Discriminatory Harassment."

M. The Internal Affairs Manager shall review each allegation entered in AIM and determine the type of investigation to be completed as set forth below. All offender deaths reported pursuant to Paragraph H, and all allegations which may constitute discriminatory harassment as determined by the EEO office, shall be assigned as an Internal Affairs monitored or Internal Affairs investigation only. The referring worksite administrator or designee shall receive notice of the decision via AIM.

1. Location Investigation: The investigation is handled solely by the worksite. Upon completion of the investigation, a final review by Internal Affairs is not required unless the severity of the allegation has increased during the investigation, in which case Internal Affairs shall be immediately contacted.

2. Internal Affairs Monitored Investigation: The investigation is handled by the worksite on behalf of Internal Affairs. The completed investigative file, including all original documents and attachments, shall be forwarded to Internal Affairs for review, closure processing, and storage as set forth in Paragraph Q. Upon completion of the Internal Affairs review, the appropriate worksite administrator shall be provided with a copy of the official investigative packet. All offender deaths reported pursuant to Paragraph H that are assigned as an Internal Affairs monitored investigation must be assigned to an Inspector or higher-level employee for investigation. The Internal Affairs Manager shall decide, based on the circumstances of the reported death, if an Inspector from a different worksite will conduct the investigation.

3. Internal Affairs Investigation: The investigation is assigned to an Internal Affairs Investigator and handled solely by Internal Affairs. Upon completion of the Internal Affairs review, the appropriate worksite administrator shall be provided with a copy of the official investigative packet.

During the past 12 months, there has been (60) allegation of sexual abuse and sexual harassment that was received. During the past 12 months, there has been (60) allegation resulting in an administrative investigation. During the past 12 months, there have been (29) allegations referred for criminal investigation.

During and following the on-site portion of the audit, investigations were reviewed with multiple methods of reporting evident in the predication of these investigations. The MSP are responsible for conducting criminal investigations should criminal behavior be observed during the facility's administrative response. Agency policies, interviews and a review of facility investigations demonstrates that the facility is in compliance with provision (a) of the standard.

The MSP investigate criminal allegations involving staff as specified under the reviewed PD 01.01.140. The investigation is monitored and coordinated by the Internal Affairs Division. PD 03.03.140 and PD 03.03.140, which were reviewed by this Auditor, address referrals to MSP of inmate-on-inmate non-consensual sexual acts and staff sexual misconduct/harassment that would constitute a criminal act. Both agency policies are published on the agency's website.

Conclusion

Auditor's analysis of policy review, investigative file review, interviews with the Warden, the PREA Manager, PREA Coordinator, Investigators, and personal observations indicate ECF is compliant with provisions of this standard.

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| 115.31 | Employee training |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1062 533" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA • MDOC PREA Plan • MDOC Training Plan 2022 • MDOC New Employee PREA (Academy) • Collaborative Case Manager for Women (CCM-W-(WHV) PowerPoint • Oaks PREA Training Progress Summary • Interviews <p data-bbox="242 562 459 589">Analysis/Reasoning</p> <p data-bbox="242 618 520 645">Policy Directive 03.03.140</p> <p data-bbox="242 674 448 701">Employee Training</p> <p data-bbox="242 707 1481 804">FF. The Administrator of the Training and Recruitment Division, BOA, or designee, in coordination with the PREA Unit subject matter experts, shall ensure the following training is developed and available to staff regarding conduct prohibited by this policy:</p> <ol data-bbox="242 810 903 1171" style="list-style-type: none"> 1. New Employee 2. In-service 3. Contractor/Volunteer 4. Basic Investigator Training 5. Health Care employees and Mental Health Care PREA Training 6. PREA Coordinator Training 7. PREA Risk Assessment Training 8. New Sergeant Training 9. New Supervisor Training 10. Specialized Female Offender Training 11. Specialized Youthful Offender Training 12. Other PREA-related training as needed <p data-bbox="242 1200 531 1227">MANDATORY REPORTING</p> <p data-bbox="242 1234 1489 1330">YY. 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 extent the law requires such reporting. Allegations of sexual abuse by a prisoner under the age of 18, or by a vulnerable adult, shall be reported to the Michigan State Police (MSP).</p> <p data-bbox="242 1359 451 1386">MDOC PREA PLAN</p> <p data-bbox="242 1393 347 1420">Employee</p> <p data-bbox="242 1449 1430 1512">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:</p> <ol data-bbox="242 1518 1473 1881" style="list-style-type: none"> (1) The Department's zero-tolerance policy for sexual abuse and sexual harassment of prisoners; (2) Staff responsibilities related to sexual abuse and sexual harassment prevention, detection, reporting and response; (3) Prisoner's right to be free from sexual abuse and sexual harassment; (4) The right of prisoners and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened or actual sexual abuse; (8) How to avoid inappropriate relationships with prisoners; (9) How to communicate effectively and professionally with prisoners including lesbian, gay, bisexual, transgender, intersex or gender nonconforming prisoners; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. <p data-bbox="242 1910 520 1937">MDOC Training Plan 2022</p> <p data-bbox="242 1966 1481 2094">All Department employees, student assistants, unpaid student interns, and contractors if they work inside a correctional facility or field office, which includes employees of other State Departments, are required to successfully complete in-service training in accordance with the requirements set forth in Policy Directive 02.05.101 In-Service Training and in the 2022 Training Plan.</p> <p data-bbox="242 2123 1457 2150">A During the pre-audit, the auditor was provided with copies of the agency's PREA curriculum, training logs, certificates of</p> |

completion, training acknowledgement forms. The training curriculum meets all requirements under 115.31 (a)-1. It includes the following topics: zero tolerance for sexual abuse and sexual harassment; definitions of sexual abuse and sexual harassment; all staff have a duty to report including third party allegations, staff neglect and misconduct and anonymous allegations; how to report and investigation of all allegations, supervision and monitoring, employee training and limits to cross gender viewing.

The Oaks CF does not house female inmates. The agency training materials that were provided to and reviewed by this Auditor adequately cover the dynamics of sexual abuse for male and female inmates as required by provision (b) of the standard. Additional training materials are provided to employees that house female inmates, these materials were provided to this Auditor and included: Collaborative Case Management for Women, Module 3: What is Gender Responsive? and The Prison Rape Elimination Act: The specific module of training on collaborative case management for women that is not just specific to PREA, but an overall gender inclusive training. This training supplements those working with female offenders on a regular basis; however, it is again noted that female inmates are not housed at the Oaks CF. Based on a review of PREA training materials and a sampling of training records; the facility demonstrates compliance with provision (b).

The Oaks CF provided ample documentation that was reviewed by this Auditor to verify that staff at the facility have completed the agency's computer-based training on sexual abuse and sexual harassment in confinement settings. Employees are required to complete this training at a minimum of every two years as noted within the agency PREA Manual; however, the training is available annually to aid in fulfillment of annual training requirements. As part of the facility's pre-audit documentation, it provided records of 310 staff completing this training as part of its annual in-service training requirements. Training records and the agency training plans demonstrate compliance with provision (c) of the standard.

Conclusion

Employees are required to complete a comprehension knowledge test relative to the training materials to verify their understanding of the materials at the end of the agency's computer-based training modules. This comprehension test comes with electronic verification by employee ID number to signify individual comprehension of the training, demonstrating compliance with provision (d) of the standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA
- Policy 03.02.105 Volunteer Services Program
- MDOC PREA Plan
- MDOC Correctional Facilities Administration (CFA)
- Oaks PREA Training Progress Summary (Health Care and Mental Health)
- Interviews

Analysis/Reasoning

Policy Directive 03.03.140

EMPLOYEE TRAINING

FF. The Administrator of the Training and Recruitment Division, BOA, or designee, in coordination with the PREA Unit subject matter experts, shall ensure the following training is developed and available to staff regarding conduct prohibited by this policy:

1. New Employee
2. In-service
3. Contractor/Volunteer
4. Basic Investigator Training
5. Health Care employees and Mental Health Care PREA Training
6. PREA Coordinator Training
7. PREA Risk Assessment Training
8. New Sergeant Training
9. New Supervisor Training
10. Specialized Female Offender Training
11. Specialized Youthful Offender Training
12. Other PREA-related training as needed

Policy 03.02.105

Volunteer Orientation

S. Volunteers and contractors, who have contact with inmates, shall be trained on their responsibilities under the Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The facility shall maintain documentation confirming that volunteers and contractors understand the training they have received.

MDOC PREA Plan

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. 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.

MDOC Correctional Facilities Administration (CFA)

This module provides standardized training and orientation training required for all new employees, contractors, vendors, skilled trades, construction workers, student interns and volunteers providing services at Correctional Facility Administration work sites. Topics included in this training program are searches, vehicles, tool control, contraband, prisoner contact, discriminatory harassment and emergencies. All new employees, contractors, vendors, skilled trades, construction workers, student interns and volunteers providing services at Correctional Facilities Administration work sites. NOTE: Vendors who are under direct continuous supervision and/or escort are required to only review the Prisoner Rape Elimination Act (PREA) portion of this module and sign the last page as an understanding of the PREA section.

The agency's training curriculum for contractors and volunteers sufficiently addresses the concepts of sexual abuse, sexual harassment, reporting and response procedures. In addition to this Auditor's review of the training materials, this Auditor reviewed a sampling of training records across multiple contractor and volunteer disciplines provided with the pre-audit

documentation to determine compliance with provision (a) of the standard.

A formal interview with one contracted personnel verified that they were provided the employee training module for MDOC employees. The training procedures enumerated within policy are applied in practice with facility volunteers, and in addition to the zero-tolerance policy and reporting procedures, volunteers are given information about respectful interactions with transgender inmates, physical boundaries and overfamiliarity. Informal interviews during the audit tour with contractors demonstrated that they were aware of their responsibilities to both report incidences of sexual abuse and sexual harassment, as well as how to act as a first responder to preserve potential evidence. The review of policy, training materials, training records and both formal and informal interviews demonstrate compliance with provision (b) of the standard.

Conclusion

The Auditor concluded the facility is appropriately training volunteers and contractors and staff ensures documentation of training is maintained. The Auditor determined through a review of agency policies, procedures, training curriculum, brochure, acknowledgment forms and interviewing contractors and volunteer personnel the facility meets the requirements of this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA
- Policy 04.01.105 Reception Facility Services
- Policy 04.01.140 Prisoner Orientation
- MDOC PREA Plan
- CAJ-1036 Prisoner PREA Education Form/ and 72-hour form
- Memo re: Inmate Education dated (January 15, 2020)
- Memo re: Language Services dated (July 20, 2015)
- Just Detention International (JDI) Post (English and Spanish)
- Sexual Abuse Poster (English and Spanish)
- Prisoner Guidebook (June 2014)
- Privacy Signs (Bi-Lingual)
- An End to Silence Inmates Handbook (September 2014)
- Interviews

Analysis/Reasoning

Policy Directive 03.03.140

Prisoner Education

HH. All prisoners shall receive comprehensive PREA education during intake and upon transfer to another facility within 30 days. Upon 72 hours of arrival at a facility, a prisoner shall receive educational material on zero tolerance, how to report, the name of the facility PREA Coordinator, the outside reporting agency, the victim advocate, and outside emotional support entity.

Policy 04.01.105

P. Prisoners shall be required to attend an orientation program developed in accordance with PD 04.01.140 "Prisoner Orientation." The orientation program shall include information on the type and purpose of reception processing and evaluations the prisoner may receive while in the reception facility. Such programs shall stress risk reduction both during incarceration and after release. In addition, prisoners identified as foreign nationals shall be provided with information on how to contact their foreign consulate. Prisoners also shall be educated regarding sexual conduct prohibited by PD 03.03.140 "Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners," self-protection, how to report conduct or threats of conduct prohibited by PD 03.03.140, and treatment and counseling available to them. Information on communicable bloodborne infections also shall be provided as set forth in PD 03.04.120 "Control of Communicable Bloodborne Diseases."

Policy 04.01.140

Prisoners shall receive orientation upon arrival at a Correctional Facilities Administration (CFA) facility as set forth in this policy.

A. Each Warden or designee shall develop and maintain an orientation program for newly arrived prisoners. If a facility includes a segregation unit, or has more than one security level, the orientation provided may be unique to the segregation unit or security level. Orientation provided to prisoners in segregation shall not be in a group setting.

B. Orientation shall be provided to prisoners within seven calendar days after arrival at the facility unless the prisoner is unavailable (e.g., out on writ; hospitalized). In such cases, orientation shall be provided as soon as possible after they become available. Prisoners in segregation who only received orientation unique to the segregation unit shall receive additional orientation within seven calendar days after placement in general population, or if unavailable, as soon as possible after they become available.

E. The prisoner guidebook that is provided to prisoners pursuant to PD 04.01.130 "Prisoner Guidebook" shall be reviewed with general population prisoners during orientation. Segregation unit rules shall be reviewed with segregation prisoners. In addition, educational information regarding the Prison Rape Elimination Act (PREA) and the PREA manual shall be provided in accordance with PD 03.03.140 "Sexual Abuse and Sexual Harassment of Prisoners – Prison Rape Elimination Act (PREA)." Information regarding communicable blood-borne infections shall be provided in accordance with PD 03.04.120 "Control of Communicable Bloodborne Disease."

MDOC PREA Plan

Prisoner Education

At reception, including entry to Lake County, Detroit Reentry Center, SAI and HYTA unit(s), prisoners shall receive comprehensive information explaining the Department's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

This information will be provided in writing and, if possible, by video/CD/DVD presentation. When possible, discussion shall be facilitated by a peer educator with staff supervision or a staff facilitator. Topics in prisoner education include prisoners' rights to be free from sexual abuse and sexual harassment and/or retaliation for reporting such incidents, available methods to report incidents, and Department policies and procedures for responding to such incidents. Upon transfer, prisoners shall receive education to the extent that policies and procedures of the prisoner's new facility differ from those of the previous facility.

The above directives 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 the PREA Coordinator and random inmates, this education is reportedly completed on the assigned housing unit for newly received inmates through the Prison Counselor or other unit management staff, and 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.

There were 411 of inmates admitted during past 12 months who were given this information at intake. There were 351 number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

Through an interview between the PREA Manager, PREA Coordinator and the Intake Staff, it was reported that the agency provides comprehensive inmate education at the Charles E. Egeler Reception & Guidance Center (RGC). All inmates that are received at the Oaks CF will have passed through this facility for classification. Inmates who are transferred from that facility to the Oaks CF, will have received comprehensive education at RGC.

During intake processing, each counselor is required to complete an immediate file review to ensure that documentation of this education session is located within. If documentation of this education is missing, the inmate is immediately scheduled for a repeat of this education at the facility. During the audit tour, this Auditor randomly sampled twelve inmate files and requested that MDOC staff show movement records to verify that education was provided in a timely manner to demonstrate compliance with provision (a) of the standard.

The above policy directives 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. This education is completed through a video-based presentation 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. Additionally, information is available in the Prisoner Guidebook. Through an interview the PREA Manager, and interviews with the Warden and PREA Coordinator, it was reported that the MDOC has an intake facility, the RGC, where intake and PREA education are completed for inmates who will be assigned to other MDOC facilities, including the Oaks CF.

The agency publishes written educational materials, such as the PREA brochure, PREA posters and Prisoner Guidebook in both English and Spanish. The agency has a braille version of the PREA brochure available for visually impaired inmates. The PREA video, Taking Action, has been closed captioned for the deaf and hard of hearing population. Each facility within the agency is responsible for maintaining an interpretation service contract for communication purposes. The Oaks CF submitted a braille trifold PREA education brochure and purchase order for Global Interpreting Services, LLC. as proof of its provision of interpretative services for disabled or LEP inmates during the intake education process. The facility also maintains copies of PREA training materials, The PREA Resource Center's "An End to Silence", agency PREA publications and the PREA standards in the law library that are available for check-out to the inmate population. Moreover, the facility also advertises the availability of these documents on housing unit bulletin boards to ensure that the inmate population is aware of their availability.

The agency and facility maintain documentation of inmate education via MDOC form CAJ-1036. As part of the facility's intake and receptions procedures, each new reception's file is reviewed and it is verified that the inmate has documented receipt of training within the file. This Auditor reviewed PREA training records and PREA risk assessment dates to confirm that the agency and the facility document timely inmate participation in education sessions, consistent with provision (e) of the standard.

Conclusion

The agency publishes posters that contain record of the agency's zero-tolerance policy and methods to report allegations of sexual abuse and sexual harassment. During a tour of the Oaks CF, these posters were visible throughout the housing units, common areas of the facility, and work locations. Inmates receive a tri-fold PREA brochure that is published in both English and Spanish during the intake process and these materials were observed to be available to inmates during the audit tour. The facility library holds a copy of the PREA Resource Center's "An End to Silence" handbook, the PREA Standards, the agency PREA Manual, training materials and Prisoner Guidebooks that are available for the inmate population to check out. Moreover, the facility also advertises the availability of these documents on housing unit bulletin boards to ensure that the inmate population is aware of their availability. Based on the efforts of the facility to actively advertise and promote PREA resources throughout all areas of the facility, this Auditor determines compliance with provision (f) of the standard. The facility meets the requirements of this standard.

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| 115.34 | Specialized training: Investigations |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1062 533" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse Sexual Harassment of Prisoners-PREA • MDOC PREA Plan • Basic Investigator Training Manual (June 2019) • New Sergeant Training PowerPoint • NIC PREA Online Training Program • Basic Investigator Training Exception and Completion Report • Interviews <p data-bbox="242 562 424 591">Analysis/Reason</p> <p data-bbox="242 620 504 649">Policy Directive 03.03.140</p> <p data-bbox="242 654 1473 748">CCC. Investigations of sexual abuse/sexual harassment shall only be completed by employees who have received specialized investigator training as outlined in the PREA Manual. All investigations shall be conducted promptly, thoroughly, and objectively in accordance with the Sexual Abuse/Sexual Harassment Investigations portion of the PREA Manual.</p> <p data-bbox="242 777 437 806">MDOC PREA Plan</p> <p data-bbox="242 810 1418 904">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.</p> <p data-bbox="242 934 1490 1232">The agency has a Basic Investigator Training Manual that was reviewed by this Auditor. This manual provides additional, specialized training for agency investigators to conduct all forms of administrative investigations, including PREA administrative investigations. This investigative course covers a PREA specific module that includes the dynamics of sexual abuse within confinement settings, interview techniques for victims of sexual abuse and also contains modules specific to the preservation of evidence, interview techniques and employee rights, such as Garrity and Miranda warnings. The evidentiary standard of preponderance of the evidence is noted within the training on administrative investigations. Training records were provided to confirm that 24 active staff at the OCF completed the agency's training. In addition to the agency's Basic Investigator Training, training records confirm that these 24 staff completed the NIC specialized investigator's training in satisfaction of provision (a) of the standard.</p> <p data-bbox="242 1261 1490 1523">The agency's investigative course covers a PREA specific module that includes the dynamics of sexual abuse within confinement settings, interview techniques for victims of sexual abuse and also contains modules specific to the preservation of evidence, interview techniques and employee rights, such as Garrity and Miranda warnings. The evidentiary standard of preponderance of the evidence is noted within the training on administrative investigations. The training informs participants on the requirements and procedures for referring potentially criminal acts for criminal investigation/prosecution. In addition to the agency's Basic Investigator Training, 24 staff have participated in the NIC specialized investigator's training to provide additional information on the required standard topics. A review of training materials and training records for facility investigators demonstrates compliance with provision (b) of the standard.</p> <p data-bbox="242 1552 1457 1646">The agency maintains documentation of investigator training in the employee's training file. The facility provided documentation that was reviewed by this Auditor to verify that 14 active employees have completed the Basic Investigator Training and also completed the NIC specialized investigator training in satisfaction of provision (c) of the standard.</p> <p data-bbox="242 1675 368 1704">Conclusion</p> <p data-bbox="242 1709 1490 1803">The Auditor concluded the agency has provided appropriate training to its Sexual Abuse Investigators. The Auditor conducted a review of policies, directives, training curriculum, PowerPoint Presentations, training records, investigative reports and conducted interviews with agency investigators to determine the agency meets the requirements of this standard.</p> |

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| 115.35 | Specialized training: Medical and mental health care |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 02.05.101 In-service Training
- MDOC PREA Plan
- Basic Training Module
- Oaks PREA Health Care and Mental Health Training Progress
- Interviews

Analysis/Reason**Policy Directive 02.05.101**

Student assistants, unpaid student interns, all Department employees, and if they work inside a correctional facility or field office, contractual employees, which includes employees of other State Departments, are required to successfully complete in-service training in accordance with the requirements set forth in this policy and the In-Service Training Plan.

MDOC PREA Plan

Specialized Training – Health/Mental Health Care In addition to the general PREA training provided to all employees, contracted and volunteer health care and mental health care staff will be provided with specialized training developed by the Training Division relating to sexual abuse in confinement settings. Specialized training shall include the following: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and whom to report allegations or suspicions of sexual abuse and sexual harassment including mandatory reporting of incidents alleged to have occurred when a prisoner was in custody of the Department.

Contractors who enter the facility to conduct forensic exams must be appropriately trained to conduct such exams and be provided with required Department contractor training and agree to abide by policy prior to providing services within the Department.

PD 02.05.101 and the PREA Manual establish procedures for ensuring staff, including contract staff, are adequately trained based on their positions within the agency. The agency has developed a training curriculum specific to medical and mental health staff that were reviewed by this Auditor. These materials expand upon the Basic Training Module to cover the four points required by the standards. 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 sexual harassment and facility reporting responsibilities for allegations of sexual abuse and sexual harassment. The MDOC also provides training to its entire medical and mental health staff to serve as a qualified agency staff member, with respect to providing victim advocacy services in the event an individual needs such support. As such, medical and mental health practitioners with the MDOC receive training beyond the standard's minimal requirements.

The facility provided documentation of medical and mental health practitioners having completed the training modules related to their specific disciplines that were reviewed by this Auditor. Through formal and informal interviews during the audit tour, both medical and mental health staff confirmed that they have received computer-based training that covers the standard requirements in satisfaction of provision (a). There are 33 number of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy. One hundred (100%) percent of all medical and mental health care practitioners who work regularly at this facility and have received the training required by agency policy. Neither the facility nor its staff conduct forensic examinations, therefore, training records consistent with provision (b) of the standard are not required to be reviewed by this Auditor.

The facility provided documentation of medical and mental health practitioners' completion of the specialized training modules that was reviewed by this Auditor. These training records are kept in the computerized training records for employees and demonstrate compliance with provision (c) of the standard.

Conclusion

This auditor interviewed medical and mental health supervisors in Oak Correctional Facility as well as informal conversations with employees scheduled to work in those areas. All staff in these areas were knowledgeable about the training received and they all confirmed having received the general and specialized training upon hire and then annually at in-service. A review of their training documentation provides evidence the training has been delivered and the participants understand the training and requirements of PREA. Based on interviews, training and personnel documentation, curricula and policy review, Oak Correctional Facility meets requirements of this standard.

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| 115.41 | Screening for risk of victimization and abusiveness |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoner -(PREA) • Policy Directive 05.01.140 Prisoner Placement and Transfer • PREA Risk Assessments Manual and Worksheet (CAJ-1023) • MDOC PREA Plan • Basic Training Module • Interviews <p>ANALYSIS/REASON</p> <p>POLICY DIRECTIVE 03.03.140</p> <p>Risk Assessments</p> <p>KK. 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 Department’s computerized database risk assessment tools shall be used to determine a prisoner’s risk. The assessment shall be completed using information contained in the prisoner’s file and in computerized databases available to employees and gathered during face-to-face discussions with the prisoner. Prisoners shall be asked: 1. Questions relating to mental, physical, or developmental disabilities. 2. Whether they are, or are perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. 3. Whether they have been previously victimized. 4. What is their perception of being vulnerable. Prisoners shall not be disciplined for refusing to answer or not disclosing complete information in response to these questions. However, refusal to answer/disclose information shall be noted in the Department’s computerized database.</p> <p>POLICY DIRECTIVE 05.01.140</p> <p>PREA Risk Assessment</p> <p>CC. If not assessed prior to arrival, a transferred prisoner shall be screened within 72 hours of arrival at the receiving facility to identify any history of sexually aggressive behavior and to assess the prisoner’s risk of sexual victimization. Staff shall complete the PREA Risk Assessments Worksheet (CAJ-1023) in accordance with the PREA Risk Assessment Manual.</p> <p>MDOC PREA Plan</p> <p>PREA Risk Assessments and Risk Assessment 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.</p> <p>PREA RISK ASSESSMENTS MANUAL AND WORKSHEET</p> <p>When/Where the Risk Assessments are Completed</p> <p><u>Reception Center:</u></p> <p>Within 72 hours of arrival (not required if assessments completed prior to arrival):</p> <ul style="list-style-type: none"> • PREA-Aggressor Risk Assessment-Prison • PREA-Victim Risk Assessment-Prison <p>Within 30 days of arrival (only required if assessments completed prior to arrival):</p> <ul style="list-style-type: none"> • PREA-Risk Assessment Review-Prison <p>When warranted due to referral, request, incident of sexual abuse, or receipt of information that bears on the prisoner’s risk of sexual victimization or abusiveness:</p> <ul style="list-style-type: none"> • PREA-Aggressor Risk Assessment-Prison • PREA-Victim Risk Assessment-Prison <p><u>Facility:</u></p> <p>Within 72 hours of arrival (not required if assessments completed prior to arrival):</p> <ul style="list-style-type: none"> • PREA-Aggressor Risk Assessment-Prison • PREA-Victim Risk Assessment-Prison <p>Within 30 days of arrival (unless the prisoner transfers from the facility prior to 30 days): • PREA-Risk Assessment Review-</p> |

Prison

When warranted due to referral, request, incident of sexual abuse, or receipt of information that bears on the prisoner's risk of sexual victimization or abusiveness:

- PREA-Aggressor Risk Assessment-Prison
- PREA-Victim Risk Assessment-Prison

MDOC PD 05.01.140 requires all residents to be screened for risk of sexual victimization or risk of sexual abusing other residents within 72 hours of their intake. Interviews with residents confirmed that they were screened within 72 hours of their intake. All residents who were interviewed indicated they were screened within seventy-two hours of their intake. Random review of residents' files supports initial screening within 72 hours, psychological screening, and reassessment within 30 days from date of arrival.

Conclusion

There 411 number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

There were (351) number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 30 days or more) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. I find Oak Correctional Facility to be in compliance with this standard.

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| 115.42 | Use of screening information |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 210 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1118 495" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA) • Policy Directive 05.01.140 Prisoner Placement and Transfer • Policy Directive 04.06.184 Gender Dyshoria • MDOC PREA Plan • Director’s Memo 2022-28-Gender Identity Housing Request • Interviews <p data-bbox="242 528 462 555">ANALYSIS/REASON</p> <p data-bbox="242 589 563 616">POLICY DIRECTIVE 03.03.140</p> <p data-bbox="242 645 1493 736">LL. 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.</p> <p data-bbox="242 770 563 797">POLICY DIRECTIVE 05.01.140</p> <p data-bbox="242 831 528 857">PREA RISK ASSESSMENT</p> <p data-bbox="242 887 1445 943">CC. 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.</p> <p data-bbox="242 976 563 1003">POLICY DIRECTIVE 04.06.184</p> <p data-bbox="242 1032 1461 1088">G. When making housing and programming assignments, the GDCRC and 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.</p> <p data-bbox="242 1122 1485 1413">This Auditor reviewed the PREA Manual, PD 05.01.140 and OP ECF 03.03.140 and found that the agency policies are compliant and mirror the language set forth in provision (a) of the standard. The agency uses a computerized assessment process to arrive at an inmate classification for risk. The results generated from the assessment preclude housing potential victims with potential abusers within the computerized bed assignment program. The facility provided a copy of their count sheets that identifies housing assignments along with assessed risk. The agency also issued an agency-wide memorandum to prohibit the pairing of identified Aggressors and Potential Aggressors with Victims or Potential Victims in isolated work assignments or those work areas with any blind spots that could enable sexual abuse. The demonstrated practice of the facility conducting these intake assessments provides evidence that key aspects of vulnerability or predatory behavior are considered for each inmate.</p> <p data-bbox="242 1447 1493 1538">Oaks CF uses information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping separate residents at high risk of being sexually victimized from residents at high risk of being sexually abusive.</p> <p data-bbox="242 1572 368 1599">Conclusion</p> <p data-bbox="242 1628 1382 1684">I find Oaks CF to be in compliance based upon review of relevant documents, interview of staff and residents, and observations while touring the facility.</p> |

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| 115.43 | Protective Custody |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 756 398" style="list-style-type: none"> • Policy Directive 04.05.120 Segregation Standards • MDOC PREA Plan • Interviews <p data-bbox="242 427 461 456">ANALYSIS/REASON</p> <p data-bbox="242 486 561 515">POLICY DIRECTIVE 04.05.120</p> <p data-bbox="242 544 1474 672">N. Prisoners 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 completed, and a determination has been made that no less restrictive means of separation from likely abusers exists. 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.</p> <p data-bbox="242 701 437 730">MDOC PREA Plan</p> <p data-bbox="242 759 1485 987">Prisoners 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 a determination has been made that no less restrictive means of separation from likely abusers exist. 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. If no less restrictive means of separation from the abuser or likely abusers exist, the prisoner shall be assigned to temporary segregation in accordance with PD 04.05.120 "Segregation Standards" for a time period not to ordinarily exceed 30 calendar days.</p> <p data-bbox="242 1016 1469 1144">This Auditor observed on-site and through documentation that the facility has a robust computerized assessment and bed management system in place to ensure that inmates at high risk of victimization are not housed with inmates at high risk of predatory behavior. As evidenced during the tour and through informal interviews with inmates, the facility takes adequate measures to ensure individualized safety needs are considered.</p> <p data-bbox="242 1173 1489 1267">Through pre-audit materials, the facility reports that there were no (0) instances of inmates being placed into involuntary segregation for risk of victimization. The Warden stated in an interview that segregation is not used to protect inmates at high risk of sexual victimization unless it is the only means of keeping an individual safe.</p> <p data-bbox="242 1296 1469 1424">In those circumstances, such placement is limited to a very short period (less than 24 hours), before the inmate can be reviewed by the security housing committee for appropriate housing within the facility or transferred to another location that can afford safety. This Auditor is satisfied that the facility refrains from placing inmates at high risk of victimization in segregated housing consistent with provision (a) of the standard.</p> <p data-bbox="242 1453 1473 1650">PD 04.05.120, OP ECF 04.05.120 and the PREA Manual, which were reviewed by this Auditor, specify that inmates shall maintain access to recreation, educational programming, and religious programming to the extent they are administratively feasible and can be safely afforded. In the event such things are restricted, the facility is required to document the nature of the restrictions according to standard language. Reportedly, the facility has not placed any victims into involuntary segregation. The Oaks CF indicated on the PAQ that no inmate victims were held in involuntary segregation during the 12 months preceding the audit.</p> <p data-bbox="242 1680 368 1709">Conclusion</p> <p data-bbox="242 1738 1473 1832">The pre-audit materials reviewed by this Auditor indicate that no inmates were housed in involuntary segregation during the past 12 months, which negates the need to conduct a 30-day review for the continuance of segregation in demonstration of compliance with provision (e) of the standard.</p> |

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| 115.51 | Inmate reporting |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1201 696" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA) • Policy Directive 05.03.118 Prisoner Mail • MDOC PREA Plan • MDOC Prisoner Guidebook • CAJ-1039 PREA Discharge Reporting Information • Trifold-MDOC Identifying and Addressing Sexual Abuse and Sexual Harassment (March 2015) • MDOC Legislative Corrections Ombudsman • Civil Immigration Memo • New Employee PREA Training • PREA Course (All Employees 2021-2022) • Facility Reporting Posters • Interviews <p data-bbox="242 730 461 757">ANALYSIS/REASON</p> <p data-bbox="242 790 520 817">Policy Directive 03.03.140</p> <p data-bbox="242 848 1449 1106"> UU. Reports can be made by employees or prisoners verbally or in writing regardless of when the incident was alleged to have occurred. Such reports may be made in any manner, including: <ol style="list-style-type: none"> 1. Privately to appropriate supervisory employees. 2. Through the MDOC Sexual Abuse Hotline. 3. By completing the Department’s Sexual Abuse/Sexual Harassment Complaint form on the MDOC website. 4. By contacting the PREA Manager. 5. By contacting the Internal Affairs Section. 6. Through an external reporting agency (Corrections Ombudsman, Crimestoppers). 7. Anonymously. </p> <p data-bbox="242 1137 1481 1261"> The MDOC PREA Prisoner Discharge Information (CAJ-1039) form shall be included in the discharge packets to inform prisoners how to report sexual abuse/sexual harassment allegations after discharge. Upon completion of the form, staff shall sign the form and provide a copy to the prisoner. Prisoner signature of receipt on this form shall be retained in the discharge packet. </p> <p data-bbox="242 1294 520 1321">Policy Directive 05.03.118</p> <p data-bbox="242 1352 1481 1581"> S. Outgoing mail of prisoners in segregation shall not be sealed and shall be inspected by staff prior to mailing. However, mail that is clearly identified as being sent to the business address of one of the following may be sealed by the prisoner and shall not be opened or otherwise inspected by staff prior to mailing unless the entity has specifically objected in writing to receiving mail from the prisoner sending the mail, and subject to Administrative Rule 791.6603(5) and Paragraphs M, P, and W: <ol style="list-style-type: none"> 7. The Office of the Legislative Corrections Ombudsman. 8. A consulate or embassy. </p> <p data-bbox="242 1612 1481 1805"> T. General population prisoners shall be permitted to send sealed mail, subject to Administrative Rule 791.6603(5) and Paragraphs M, P, and W. However, outgoing mail may be opened and inspected if it is determined by the Warden or designee that there are reasonable grounds to believe the mail is being sent in violation of Administrative Rule 791.6603(5). However, mail which is clearly identified as being sent to the business address of one of the following may be sealed by the prisoner and shall not be opened or otherwise inspected by staff prior to mailing, unless the entity has specifically objected in writing to receiving mail from the prisoner sending the mail or as required pursuant to Paragraphs M, P, or W: </p> <p data-bbox="242 1839 663 1865">MAIL REQUIRING SPECIAL HANDLING</p> <p data-bbox="242 1897 1481 2089"> FF. A prisoner may have his/her incoming legal mail receive special handling by submitting a completed Mail Requiring Special Handling form (CSJ-246) to the institution's mailroom supervisor or designee. Only mail received directly from an attorney or a law firm, a legitimate legal service organization, the Department of Attorney General, a prosecuting attorney's office, a court, a clerk of the court, a Friend of the Court office, or the Office of the Legislative Corrections Ombudsman is considered legal mail, and only if the mail is clearly identified on the face of the envelope as being from one of the above. It is not sufficient for the envelope to be simply marked "legal mail." </p> <p data-bbox="242 2121 437 2148">MDOC PREA Plan</p> |

Prisoner Reporting Prisoners may privately report sexual abuse, sexual harassment, retaliation by other prisoners or staff for reporting sexual abuse or sexual harassment, and staff neglect or dereliction of duty that may have contributed to such incidents verbally, in writing, anonymously or through third parties. Prisoners can file such reports through:

- (1) verbal and/or written report to any staff member,
- (2) the MDOC Sexual Abuse Hotline,
- (3) prisoner grievance process,
- (4) via third parties, or
- (5) informing the Michigan Legislative Corrections Ombudsman.

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. 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

PRISONER GRIEVANCE PROCESS Sexual Abuse Allegations prisoners may file a PREA Grievance at any time regarding alleged sexual abuse. Prisoners must follow the PREA Grievance process as outlined in PD 03.03.140 "Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving PRISONERS."

Sexual Harassment Allegations prisoners may file a Grievance at any time regarding alleged sexual harassment. Prisoners must follow the Grievance process as outlined in PD 03.02.130 "Prisoner/Parolee Grievances."

PD 03.03.140, the PREA Manual, Prisoner Guidebook, Sexual Abuse Poster (advertising the sexual abuse hotline) and the PREA brochure were reviewed by this Auditor in determining compliance with provision (a). 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 hotline, 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 tour, adequate reporting hotline posters were prominently displayed throughout the facility. During audit tour informal interviews, staff were aware of their obligations to accept reports from inmates and most inmates who were informally interviewed stated they were comfortable making a report to a staff member. Staff and inmates were aware of the ability to make written reports through the various available means and were aware of the hotline. This Auditor reviewed facility investigations randomly selected for post-audit review and noticed that multiple forms of inmate reporting were evident demonstrating compliance with provision (a) of the standard.

PD 03.03.140, the PREA manual and the Prisoner Guidebook, which were reviewed by this Auditor, confirm that reports of sexual abuse and harassment may be reported outside the agency to the Legislative Corrections Ombudsman. Such reports can be made anonymously. The Memorandum of Understanding (MOU) between the two agencies specifies that reports must be forwarded immediately. Neither the facility nor the agency hold individuals for civil immigration purposes to require information with this section of provision (b) of the standard.

Conclusion

During interviews, some inmates stated that they could talk to the staff if they had any issue. Several expressed that they felt safe and knew of the PREA safety postings on the bulletin boards in the housing units, dining hall, and other common areas. According to the Civil Immigration Memo, the agency does not house offenders for immigration purposes.

This Auditor finds Oaks CF to be in compliance with this standard based upon interviews of staff and residents, observations during the tour, and review of relevant policies and procedures.

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| 115.52 | Exhaustion of administrative remedies |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="240 208 451 235">Auditor Discussion</p> <p data-bbox="240 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="240 304 1118 495" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA) • MDOC PREA Plan • Prisoner Guidebook • Class Settlement Agreement • CAJ1038AGrievance Form • Interviews <p data-bbox="240 528 459 555">Analysis/Reasoning</p> <p data-bbox="240 589 520 616">Policy Directive 03.03.140</p> <p data-bbox="240 645 1485 804">VV. The MDOC has eliminated the administrative grievance procedure for addressing prisoner grievances regarding sexual abuse. If prisoners utilize the prisoner grievance system to report an allegation of sexual abuse, the facility Grievance Coordinator shall forward the sexual abuse allegation to the facility PREA Coordinator for further handling in accordance with this policy, and the sexual abuse grievance shall be removed from the grievance process. The prisoner shall be notified in writing that this has occurred.</p> <p data-bbox="240 837 437 864">MDOC PREA Plan</p> <p data-bbox="240 893 501 920">Sexual Abuse Allegations</p> <p data-bbox="240 927 1409 1021">Prisoners may file a PREA Grievance at any time regarding alleged sexual abuse. Prisoners must follow the PREA Grievance process as outlined in PD 03.03.140 “Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving PRISONERS.”</p> <p data-bbox="240 1050 1445 1144">All allegations of sexual abuse contained within a grievance must be referred to the appropriate custody supervisor for investigation in accordance with PD 01.01.140 “Internal Affairs”, PD 03.03.140 “Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Offenders”, and this manual.</p> <p data-bbox="240 1173 1059 1200">For grievances containing allegation(s) of sexual abuse, the Department shall not:</p> <ol data-bbox="240 1232 1445 1391" style="list-style-type: none"> (1) Impose a time limit on when a prisoner may submit a grievance regarding an allegation of sexual abuse, (2) Require a prisoner to attempt to first resolve the matter with the alleged perpetrator; (3) Require the prisoner to submit the grievance to the alleged perpetrator; (4) Refer the grievance for review or investigation by the alleged perpetrator; (5) Disregard any allegations of sexual abuse when the grievance contains multiple issues or would otherwise be denied. <p data-bbox="240 1422 1481 1516">The PREA Coordinator shall ensure a written response is provided to the prisoner, regarding his/her PREA Grievance within 60 calendar days of receipt of the Step I PREA Grievance, absent an extension. The facility may claim an extension, not to exceed an additional 70 calendar days.</p> <p data-bbox="240 1547 1477 1675">Prisoners may appeal a step I decision to Step II if s/he is dissatisfied with the step I response or did not receive a step I response in a timely manner. The step II response shall be the Department’s final decision regarding the matter. The Step II response shall be issued within 90 calendar days of receipt of the Step I PREA Grievance, absent an extension. The time consumed by the prisoner to prepare his/her appeal shall not be included in the time limits listed above.</p> <p data-bbox="240 1706 1489 1800">Third parties, including fellow prisoners, staff members, family members, attorneys and outside advocates, shall be permitted to assist prisoners in filing PREA Grievances related to sexual abuse, and shall be permitted to file such grievances on the prisoner’s behalf.</p> <p data-bbox="240 1832 1481 1991">If a PREA Grievance alleging sexual abuse is filed by a third party on behalf of a prisoner, the alleged victim must sign the PREA Grievance authorizing the grievance to be filed on his/her behalf. Failure to sign will result in the grievance being immediately dismissed. All Department responses to PREA grievances filed by a third party shall be provided to the prisoner on whose behalf the PREA grievance was filed. any issues other than sexual abuse addressed in third party PREA grievances shall be denied in accordance with policy.</p> <p data-bbox="240 2022 711 2049">Substantial Risk Of Imminent Sexual Abuse</p> <p data-bbox="240 2080 1485 2139">If a prisoner has reasonable belief s/he is subject to a substantial risk of imminent sexual abuse, s/he may file an Emergency PREA Grievance in order to seek protection from the imminent risk. The PREA Grievance filed must clearly indicate the</p> |

grievance is an Emergency PREA Grievance and state in a clear and concise manner what the prisoner believes to be an imminent risk.

Upon receipt of an Emergency PREA Grievance, staff shall forward the grievance to the Warden, or designee, in order for immediate corrective action to be taken, if appropriate, to protect the prisoner from sexual abuse. The Warden, or designee, shall provide an initial response within 48 hours addressing the prisoner's claim regarding imminent risk and whether emergent action is necessary. The facility's initial response shall be immediately forwarded to the PREA Manager who will provide the Department's final decision regarding the prisoner's claim of imminent risk. The PREA Manager will provide the decision within 5 calendar days. The facility's initial response and the agency's final decision shall document whether the prisoner is in substantial risk of imminent sexual abuse and if any emergent action was necessary.

For the purpose of prisoner disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying even if an investigation does not establish evidence sufficient to substantiate the allegation. If a prisoner intentionally makes false allegations of sexual abuse that is investigated and determined to be No Evidence/Unfounded, the prisoner may be disciplined in accordance with PD 03.02.130 "Prisoner/Parolee Grievances" and PD 03.03.105 "Prisoner Discipline."

Grievances received on a PREA Prisoner Grievance Form (CAJ-1038A) alleging anything other than sexual abuse shall be Denied and instructions provided to the prisoner to submit the grievance in accordance with PD 03.02.130 "Prisoner/Parolee Grievances."

The requirements outlined in this section do not restrict the Department's ability to defend against a prisoner lawsuit on the grounds that the applicable statute of limitations has expired.

Sexual Harassment Allegations

Prisoners may file a Grievance at any time regarding alleged sexual harassment. Prisoners must follow the Grievance process as outlined in PD 03.02.130 "Prisoner/Parolee Grievances."

All allegations of sexual harassment contained within a grievance must be referred to the appropriate custody supervisor for investigation in accordance with PD 01.01.140 "Internal Affairs", PD 03.03.140 "Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Offenders," and this manual.

The agency utilizes administrative procedures to address sexual abuse and is not exempt as specified in provision (a) of the standard. PD 03.03.140, the PREA Manual and the Oaks C F Prisoner Guidebook, which were reviewed by this Auditor in determining compliance with provision (b), allow for an inmate's grievance to be submitted at any time to the facility staff identified by the Warden. 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 PD 03.02.130 Prisoner/Parolee Grievances.

PD 03.03.140, the PREA Manual and the Oaks CF Prisoner Guidebook, which were reviewed by this Auditor in determining compliance with provision (c), allow for an inmate's grievance to be submitted at any time to the facility staff identified by the Warden. PD 03.03.140 specifies that the grievances will not be referred to the staff member subject to the complaint within. Grievances may also be submitted in locked boxes throughout the facility. During the course of the audit, review of investigations revealed that many were initiated by inmate grievance forms.

A review of PD 03.03.140, the PREA Manual and facility investigations demonstrates that facility practice is in compliance with provision (d) of the standard. PD 03.03.140 and the PREA Manual, which were reviewed by this Auditor in determining compliance with provision (e) of the standard, permit 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 CAJ1038A 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.

Conclusion

In the past 12 months, (0) grievances were filed of alleged sexual abuse. In the past 12 months, (0) grievances were filed alleging sexual abuse that reached final decision within 90 days after being filed. In the past 12 months, (0) alleging sexual abuse that involved extensions because final decision was not reached within 90 days.

The Auditor determined the Oaks CF has appropriate policies and procedures in place for addressing offender allegations of sexual abuse and an imminent risk of sexual abuse. Facility staff understand the agency's procedures and the offender population is aware they can submit grievances alleging sexual abuse and/or risk of imminent sexual abuse. The Auditor

reviewed the agency's policies, procedures, Prisoner Guidebook, grievances, investigative records, and conducted interviews with staff and prisoners to determine the facility meets the requirements of this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA)
- Policy Directive 05.03.130 Prisoner Telephone Use
- MDOC PREA Plan
- Just Detention International MOU
- Just Detention International Posters (English and Spanish)
- An End to Silence Inmates' Handbook Identifying and Addressing Sexual Abuse
- Prisoner Guide Book
- Interviews

Analysis/Reasoning

Policy Directive 03.03.140

SSS. The Department shall provide prisoner victims with mailing addresses and toll-free phone numbers to outside victim advocates for confidential emotional support services related to sexual abuse.

Policy Directive 05.03.130 - UNIVERSAL LIST

AA. In addition to the names and telephone numbers identified on their approved PAN, a prisoner shall be permitted to call any person or organization identified on the universal list (Attachment B). Only attorneys, court monitors, public interest groups, governmental agencies, and similar persons or entities may be considered for placement on the universal list. The CFA Deputy Director shall be responsible for approving placement on the universal list and/or determining if those calls will be monitored.

MONITORING

DD. All telephone, TTY, CapTel, Videophone, and VRS calls made from telephones/devices designated for prisoner use shall be monitored, except for calls to the following:

1. A public official (i.e., any elected federal, state, or local government official, or an ambassador or a consulate general) who has made a written request to not have their calls monitored. Requests from public officials shall be made to the CFA Deputy Director or designee, who shall verify the authenticity of the request before notifying the appropriate telephone company that the number is not to be monitored. The CFA Deputy Director or designee shall notify the appropriate telephone company to appropriately enter the number within one business day after receipt of the notice. The telephone company will appropriately enter the number within two business days and provide written acknowledgment of this to the CFA Deputy Director or designee within three business days, after its receipt of the notice.
2. Business telephone numbers of attorneys, the Legislative Ombudsman, DRM, an Embassy, a Consulate, and legitimate legal service organizations after a request has been received from the prisoner not to monitor, except if the attorney is related to the prisoner by blood or marriage. Only telephone numbers verified as set forth in Paragraphs EE and FF shall be entered into the system as a number that is not to be monitored.
3. A number on the universal list, except as otherwise indicated on Attachment B.

Notice of Monitoring

GG. Each Warden shall ensure that a notice, written in English and Spanish, is posted within visual range near each telephone designated for prisoner use that specifically state that all calls are being recorded and may be listened to. The notice shall remain posted at all times and shall be immediately replaced if stolen or defaced.

HH. In addition to the posting of signs, both the prisoner and the party who is called shall be verbally notified prior to the initiation of their conversation that the conversation is monitored. The Warden or designee shall ensure that the verbal notification system is checked periodically to verify that it is functioning properly. If it is not functioning properly, monitoring of telephone calls shall immediately cease until the problem is corrected. The CFA Deputy Director or designee shall be notified promptly of the malfunction.

UNIVERSAL LIST

The following have been placed on the universal list which allows all prisoners to have access to the specified telephone numbers:

1. State Appellate Defender Office - Detroit (313-256-9822)
2. State Appellate Defender Office - Lansing (517-334-6069)
3. State Appellate Defender Office - General (313-256-9833)
4. Michigan Appellate Assigned Counsel System (517-334-1200)
5. American Friends Service Committee (734-761-9796)
6. Crime Stopper Tip Line (*767)
7. Sexual Abuse Hotline (*00553557732)
8. Embassy and/or Consulate of a foreign national prisoner (Facility staff must confirm the number with the Office of Legal Affairs).
9. Michigan Veteran Resource Center (800-642-4838)
10. Sexual Abuse Support Line - An Inside Line (*12348861492)
11. McBride Settlement Monitor (888-447-2268)
12. IRS (Economic Impact Payments) (800-830-5084)
13. IRS (Economic Impact Payments – Help Line) (800-919-9835)
14. Federal Student Aid Information Center (800-433-3243)
15. Federal Student Aid – Defaulted Loans (800-621-3115)

MDOC PREA PLAN

The Department shall attempt to make available a victim advocate from a rape crisis center, which are not part of the criminal justice system, that provide counseling and confidentiality to prisoner victims. If a victim advocate from a rape crisis center is not available to provide victim advocate services, the facility shall make available to the prisoner a properly trained advocate from: (1) The hospital at which the prisoner will be transported for sexual abuse treatment, (2) The facility's medical and/or mental health staff, (3) On-Shift facility staff who have agreed to be a victim advocate, (4) Off-Shift facility staff who have agreed to be a victim advocate.

Through an interview between the Auditor and the PREA Manager, and an interview with the facility PREA Coordinator, it was determined by this Auditor that the agency and facility work collaboratively to establish relationships with outside support services.

The ECF posts information accessible to the inmates for the Rape, Abuse & Incest National Network (RAINN) to provide telephone sexual abuse counseling/advocacy services. Just Detention International (JDI) and confirmed that they would provide supplemental victim advocate services to inmates of the ECF in the form of referral to survivor outreach services and provide limited immediate emotional support services. Information for inmates to contact JDI was readily available on the inmate housing units.

While no agreement is in place with a local rape crisis center, the facility and the agency maintain a copy of the "An End to Silence" handbook published by the PREA Resource Center and utilizes telephone sexual abuse counseling/advocacy services through RAINN. The MDOC has established a Memorandum of Understanding with JDI to institute a statewide crisis sexual abuse support line for survivors of sexual abuse and sexual harassment housed within the MDOC. JDI shall engage the Michigan Coalition to End Domestic and Sexual Violence and local rape crisis centers, with the goal of building the capacity of Michigan service providers and ensuring that referrals are made to MDOC inmates are as effective as possible.

Copies of An End to Silence are maintained in the facility library and are accessible to inmates. Neither the agency nor the facility house civil immigration detainees; therefore, resources under this element of provision (a) are not applicable. Inmates are aware of monitoring procedures when contacting any agency listed within the An End to Silence publication, RAINN, or JDI.

Randomly sampled inmates struggled to affirmatively identify the An End to Silence resource guide within the facility library or affirm knowledge of RAINN and where to locate the telephone number. However, this Auditor observed that the facility advertises the availability of these resource on inmate bulletin boards within the housing units, ensuring that the inmate population is meaningfully informed of the availability of these resources.

The facility is determined compliant with the language within provision (a) of the standard by substantial efforts to provide services though JDI, RAINN, and the An End to Silence resource guide in the absence of a formal agreement with adequate advocacy services.

Through PD 05.03.130 PRISONER TELEPHONE USE, the PREA Manual and the Prisoner Guidebook, which were reviewed by this Auditor in determining compliance with provision (b) of the standard, inmates are adequately made aware of how communications are monitored, and which lines of communication are unmonitored for confidentiality purposes. Signs posted on the inmate housing units for JDI included statements that the calls may be anonymous and are unmonitored.

Conclusion

Based on policy review, interviews with inmates, interviews, review of correspondence between ECF and JDI, ECF meets the requirements of this standard.

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| 115.54 | Third-party reporting |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA)
- MDOC PREA Manual
- MDOC Website Reporting
- CAJ-1038A PREA Grievance Form Sample
- Legislative Corrections Ombudsman MOU
- Just Detention International Posters (English and Spanish)
- MDOC PREA Public Website Reporting Requirements Sample
- Interviews

Analysis/Reasoning**Policy Directive 03.03.140**

For allegations of sexual abuse that occurred outside the MDOC - To the outside facility or local law enforcement agency where the incident was alleged to have occurred. When a PREA allegation is received by any MDOC office or location, other than a correctional facility, it shall be reported using the MDOC Online PREA Reporting Form on the MDOC website/PREA page. This includes any allegation received regarding sexual abuse and sexual harassment at a county jail, another state or federal prison, an MDOC facility, or a juvenile detention facility. If any documents related to the allegation are available, they must be scanned and e-mailed to the PREA Manager for review and follow-through.

WW. Prisoners may utilize the prisoner grievance system in accordance with PD 03.02.130 "Prisoner/Parolee Grievances" to report allegations of sexual harassment or retaliation. However, because grievances require processing time and may not prompt immediate action, prisoners in need of immediate assistance should notify an employee.

The above policies were reviewed including the PREA Manual that indicated that 3rd-parties, including fellow prisoners, staff members, family members, attorneys and outside advocates, shall be permitted to assist prisoners in filing PREA Grievances related to sexual abuse, and shall be permitted to file such grievances on the prisoner's behalf. It also indicates that if a 3rd-party does file a PREA Grievance on behalf of a prisoner, the alleged victim must sign the PREA Grievance authorizing the grievance to be filed on his/her behalf.

Also reviewed was the OP 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners that indicated that prisoners may report allegations of conducted prohibited in the policy, including threats of such conduct and retaliation for reporting such conduct, verbally or in writing to any Department staff, through the MDOC Sexual Abuse Hotline, through the PREA Grievance process as outlined in policy, and through the Legislative Corrections Ombudsman or through a 3rd-party. Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners was reviewed and indicated similar information and added that 3rd-parties including fellow prisoners, staff members, family members, attorneys, and outside advocates, shall be permitted to assist prisoners in filing PREA grievances related to sexual abuse, and shall be permitted to file such grievances on the prisoner's behalf.

All policy content is consistent with the requirements of the provision. Pre-audit, the facility responded positively in the questionnaire that the agency/facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The facility provided samples of items that can be completed on behalf of alleged sexual abuse or sexual harassment victims and these items include: CAJ-1038A PREA Prisoner Grievance form which indicated an option for third-party submission; and use of a Legislative Corrections Ombudsman that can receive and immediately forward prisoner reports of sexual abuse and sexual harassment to MDOC officials that were made verbally, in writing anonymously and from third parties.

Electronically, third-parties can use the MDOC's website to report PREA allegations on behalf of prisoners; this was observed by the auditor. The facility also responded positively in the questionnaire that the agency/facility publicly distributes information on how to report inmate sexual abuse or sexual harassment on behalf of inmates. Pre-audit the facility also provided screen images of the MDOC's public website explaining PREA reporting requirements and indicates that third-parties can report PREA allegations on behalf of inmates by contacting the facility, using the PREA hotline, reporting online through the MDOC's public website, and writing to the PREA office. During the onsite phase of the audit, the audit team observed PREA posters displayed throughout the facility which indicates that parolees, staff, or the public can report PREA allegations through the PREA Hotline and also online at www.michigan.gov/corrections.

Conclusion

The auditor finds that based on pre-audit materials reviewed including policy and document samples, and observations during the facility tour, the facility meets all requirements of provision (a) and is overall compliant for the standard.

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| 115.61 | Staff and agency reporting duties |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1118 427" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA) • MDOC PREA Manual • MDOC Employee Handbook • Interviews <p data-bbox="242 463 459 490">Analysis/Reasoning</p> <p data-bbox="242 519 847 546">Policy Directive 03.03.140-Reporting Prohibited Conduct</p> <p data-bbox="242 575 1484 871">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. 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.</p> <p data-bbox="242 902 1489 1263">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.</p> <p data-bbox="242 1270 1461 1395">The PREA Manual- Staff Reporting: Information related to a sexual abuse allegation shall not be revealed to anyone other than to the extent necessary for treatment, investigation or other security and management decisions. 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.</p> <p data-bbox="242 1426 1479 1588">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.</p> <p data-bbox="242 1619 1490 1711">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.</p> <p data-bbox="242 1742 1479 1868">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).</p> <p data-bbox="242 1899 1479 2024">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 Staff, Administration, and PREA Coordinator, it was observed that Marquette Branch Prison does not house youthful offenders and is therefore compliant with provision of the standard.</p> <p data-bbox="242 2056 1484 2150">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</p> |

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.

Conclusion

Interviews with Random Staff, Administration, Inspectors, and review of available documentation showed that the facility does accept and report all reports of Sexual Harassment and Sexual abuse, including third party reporting.

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| 115.62 | Agency protection duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA) • Policy Directive 05.01.140 Prisoner Placement and Transfer • MDOC PREA Manual • Interviews <p>Analysis/Reasoning</p> <p>The above policies were reviewed including the PREA Manual that indicates that when a prisoner is subject to substantial risk of imminent sexual abuse or is the alleged victim of sexual abuse, the facility shall take immediate action to protect the prisoner by ensuring no contact between the alleged abuser and the alleged victim. Such actions can include housing changes, temporary segregation, reassignment, stop orders and transfers that must be documented, including the time between report and when the action was taken.</p> <p>PD 03.03.140 was reviewed, and it indicates that upon receipt of a PREA Grievance, staff shall forward the grievance to the Warden, or designee for immediate corrective action to be taken if appropriate, to protect the prisoner from sexual abuse. The remainder of the policy directive discusses timeframes within which action is required with an initial response being required within 48-hours.</p> <p>PD 05.01.140 was reviewed, and it indicates that 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 the alleged victim. Actions to protect the prisoner align with actions directed in the aforementioned policies. Content of the policies is consistent with the requirements of the provision.</p> <p>Conclusion</p> <p>The ECF indicated on that PAQ that no inmate victims were held in involuntary segregation following an allegation of sexual abuse during the 12 months preceding the audit. Alleged abusers are placed into administrative custody to ensure victims' safety, demonstrating that the facility does take immediate action to protect inmates from substantial risk of sexual abuse. This Auditor determines compliance with provision (a) of the standard based on the facility's immediate action in response to perceived threats of sexual abuse.</p> |

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners (PREA)
- MDOC PREA Manual
- Interviews

Analysis/Reasoning

PD 03.03.140

XX. Any allegations received directly in the PREA Section shall be forwarded to the facility where the conduct is alleged to have occurred. If an allegation received at a facility pertains 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 as follows:

1. For allegations of sexual abuse within the MDOC - To the appropriate facility head. The appropriate facility head shall verify whether the allegation had been previously investigated. If not, they 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 Manager.
2. For allegations of sexual abuse that occurred outside the MDOC - To the outside facility or local law enforcement agency where the incident was alleged to have occurred. When a PREA allegation is received by any MDOC office or location, other than a correctional facility, it shall be reported using the MDOC Online PREA Reporting Form on the MDOC website/PREA page. This includes any allegation received regarding sexual abuse and sexual harassment at a county jail, another state or federal prison, an MDOC facility, or a juvenile detention facility. If any documents related to the allegation are available, they must be scanned and e-mailed to the PREA Manager for review and follow-through.

MDOC PREA Manual

If a prisoner alleges that s/he was sexually abused while confined at a different facility, including, but not limited to county jails, another state or federal prison, or substance abuse program facility, staff shall forward the allegation to the Warden or Administrator at the prisoner's current facility. Whether or not the prisoner indicates the allegation was investigated, the Warden or Administrator shall provide email notification immediately, but no later than 72 hours, to the Warden or Administrator of the other location where the incident was alleged to have occurred with a courtesy copy to the Department PREA Manager.

PD 03.03.140, the PREA Manual and work rules published within the Employee Handbook, which were reviewed by this Auditor, confirm that staff are required to report all elements denoted within provision (a) of the standard. PD 03.03.140 dictates that staff at the ECF are responsible for making reports to their immediate supervisor and documenting their actions as soon as possible. The facility provided multiple pre-audit samples to confirm that staff took reports of sexual abuse from inmates used to initiate investigations. Formal and informal interviews during the audit tour indicate that staff are aware of their need to take immediate action with any reports of sexual abuse, sexual harassment or retaliation that comes to their attention, complaint with provision (a) of the standard.

PD 03.03.140 and the PREA Manual, which were reviewed by this Auditor, establish procedures for notifying other facilities of allegations of sexual abuse that did not occur in the receiving institution within 72 hours. The example reports provided pre-audit and reviewed by this Auditor were sufficient to determine compliance with provision (b) of the standard.

The PREA Manual and PD 03.03.140, which were reviewed by this Auditor, require that such notifications are made within 72 hours. The facility examples reviewed by this Auditor demonstrated compliance with provision (c) of the standard.

PD 03.03.140 and the PREA Manual, which were reviewed in determining compliance with provision (d) of the standard, establish procedures for ensuring that any allegations received from other confinement facilities are investigated. The facility receiving the allegation must ensure the allegation was not previously investigated. If the allegation was not investigated, the facility shall conduct an investigation of the allegations. Both the Warden and the PREA Coordinator both confirm that allegations received from other confinement facilities are properly investigated. Pre-audit sample documentation confirmed that notifications were made from facility head to facility head and promptly forwarded to the appropriate investigative office to be investigated in accordance with the PREA standards and agency policy.

Through an interview between the agency head's designee, interviews with the Warden and the facility PREA Coordinator,

and review of sample documentation, this Auditor is satisfied that sufficient procedures are in place to address allegations consistent with provision (d) of the standard should they be reported.

Four (4) allegations were received within the last 12 months that an inmate was abused while confined at another facility. Auditor reviewed documentation provided for these reports and found that these reports received over the past 12 months that allegedly occurred at another institution reflected notification was made by the Superintendent within the 72-hour requirement.

Conclusion

Auditor's review of policy, documentation noted in narrative above, and interviews with the Agency Head designee, the Warden, and the PREA Coordinator Oak Correctional Facility meets all provisions of this standard.

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| 115.64 | Staff first responder duties |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |

Policy, Materials, Interviews and Other Evidence Reviewed

- MDOC PREA Manual
- Basic Investigator Training
- MDOC Sexual Violence Response Investigation Guide
- 2021-2022 – PREA Course for All Employees (NPRC)
- Interviews

Analysis/Reasoning

MDOC 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: 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.

Non-custody staff shall:

- (1) immediately notify his/her chain of command for a referral to the appropriate custody supervisor.
- (2) request that the prisoner victim not take any action that could destroy potential physical and/or forensic evidence.

The PREA Manual, which was reviewed by this Auditor, requires the first responding security staff member to take the four actions specified by provision (a) of the standard to ensure the safety of the victim and preservation of any forensic evidence should the allegation have taken place within a period of time for the collection of such evidence from the victim and the abuser.

Pre-audit, the facility responded positively that it has a first responder policy for allegations of sexual abuse, and that the policy covers all 4-enumerated items of the provision for steps that first responder security staff are required to take.

In the past 12-months, there were 34-allegations of inmate sexual abuse according to the questionnaire. Of these allegations, in the past 12 months, there were 0 number of times the first security staff member to respond to the report separated the alleged victim and abuser.

In the past 12 months, there were (1) number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were (1) number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there were (1) number of times the first security staff member to respond to the report requested that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, there was (0) number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

There were no non-security first responders during the audit period. During the audit tour, staff were informally interviewed and demonstrated that they were well aware of their responsibilities to request that the alleged victim not take any actions that could destroy physical evidence to demonstrate compliance with provision (b) of the standard.

Conclusion

All staff interviews demonstrated knowledge of the process. For these reasons noted, the auditor finds the facility in compliance with the requirements of this standard.

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| 115.65 | Coordinated response |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Operating Procedure (ECF-03.03.140) Prohibited Sexual Conduct Involving Prisoners • MDOC PREA Manual • Interviews <p>Analysis/Reasoning</p> <p>Operating Procedure (ECF-03.03.140) 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 allegation of sexual abuse.</p> <p>MDOC PREA MANUAL</p> <p>Facility Plan states each correctional facility shall include in their operating procedures an institutional plan to coordinate actions taken in response to an allegation of sexual abuse.</p> <p>During the onsite phase of the audit, the Warden was interviewed and responded positively that the facility has a plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse. He further elaborated that this is defined in policy, procedure, the PREA Manual and that staff receive training in their first responder responsibilities.</p> <p>Conclusion</p> <p>The auditor finds that based on pre-audit materials reviewed including policy, and staff interviews, the facility meets all requirements of provision (a) and is overall compliant for the standard.</p> |

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| 115.66 | Preservation of ability to protect inmates from contact with abusers |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 770 562" style="list-style-type: none"> • AFSCME CBA- 2022-2024 • MDOC PREA Manual • MSEA Collective Bargaining Agreement 2022-2024 • SEIU 517M HSS 2022-2024 • SEIU 517M SE 2022-2024 • SEIU 517M Tech CBA 2022-2024 • UAW CBA 2022-2024 • Interviews: <p data-bbox="242 595 459 624">Analysis/Reasoning</p> <p data-bbox="242 651 539 680">COLLECTIVE BARGAINING</p> <p data-bbox="242 707 1445 770">The Department, or another governmental entity on behalf of the Department, shall not enter into or renew any collective bargaining agreements that:</p> <ol data-bbox="242 775 1490 1106" style="list-style-type: none"> (1) Limits the Department's ability to remove alleged staff sexual abusers from contact with prisoners pending the outcome of an investigation; (2) Imposes a standard higher than preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated; (3) Limits the determination of whether and to what extent discipline is warranted; (4) Prohibits disciplinary sanctions up to and including discharge for violating Department Work Rule #50 "Overly-Familiar or Unauthorized Contact," #51 "Sexual Conduct with Offender," or #52 "Sexual Harassment of Offender," with discharge being the presumptive disciplinary sanction for staff who engage in sexual abuse; (5) Prohibits disciplinary sanctions that are not consistent for circumstances that are similarly situated; (6) Prohibits referral to law enforcement and relevant licensing bodies, regardless of whether the staff member resigned. <p data-bbox="242 1133 1437 1196">The MDOC's PREA Manual's language, which was reviewed by this Auditor, mirrors the language of provision (a) of the standard.</p> <p data-bbox="242 1223 1461 1420">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 Employees 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.</p> <p data-bbox="242 1447 1490 1576">This Auditor was satisfied that all agreements preserve the ability of the employer to remove alleged staff abusers from contact with inmates, consistent with provision (a) of the standard. 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.</p> <p data-bbox="242 1603 1490 1733">An interview between the agency head's designee and the PREA Coordinator confirms that the agency maintains the right to assign staff, even in the case of such employee winning a bid position. There are no terms within the bargaining contracts that prevent the employer from removing staff for cause during an investigation to demonstrate compliance with provision (a) of the standard.</p> <p data-bbox="242 1760 368 1789">Conclusion</p> <p data-bbox="242 1816 1490 1879">Based on the feedback in all interviews, the review of the plan, and review of completed investigations, the auditor finds there is ample evidence to support a finding of compliance.</p> |

Auditor Overall Determination: Meets Standard

Auditor Discussion

Policy, Materials, Interviews and Other Evidence Reviewed

- PD 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners
- MDOC PREA Manual
- CAJ-1022 PREA Sexual Abuse Retaliation Monitoring form sample
- ECF Memo PREA Retaliation Monitors dated March 07, 2019
- Interviews

Analysis/Reasoning

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.

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.

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, even 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.

The PREA Manual- Protection from Retaliation indicates that there will be periodic status checks.

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.

The PREA Manual- Protection from Retaliation: If the investigation determines that the allegation is No Evidence/Unfounded, the retaliation monitoring shall discontinue.

Conclusion

Random Staff, Random Inmate, PREA Coordinator, Inspectors, and Administration interviews affirmed that inmates and staff are aware of the right to be free of retaliation. A review of documentation provided shows that inmates are monitored for retaliation for a period of 90 days minimum. There were (0) number of times an incident of retaliation occurred in the past 12 months.

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| 115.68 | Post-allegation protective custody |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="244 304 702 398" style="list-style-type: none"> • PD 04.05.120 PREA Segregation Standards • MDOC PREA Manual • Interviews <p data-bbox="244 432 459 459">Analysis/Reasoning</p> <p data-bbox="244 488 1485 548">This Auditor reviewed the PREA Manual in determining compliance with this standard. The PREA Manual contains language consistent with conditions enumerated under standard §115.43.</p> <p data-bbox="244 577 1477 638">The facility reports, through interviews with the Warden and PREA Coordinator, and documentation in the PAQ that zero (0) inmates have been placed into involuntary segregation due to risk of victimization in the 12 months preceding this audit.</p> <p data-bbox="244 667 1474 761">During a tour of the segregated unit, it was clear to this Auditor that once an inmate is placed into segregation that opportunities are limited regardless of the reason for placement into segregation. The review of sampled investigations did not reveal that individuals who reported sexual abuse were involuntarily placed into post-allegation protective custody.</p> <p data-bbox="244 790 368 817">Conclusion</p> <p data-bbox="244 846 1449 907">Based on a review of investigations, it appears that the facility used post-allegation protective custody consistent with the requirements of §115.68 and §115.43.</p> |

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| 115.71 | Criminal and administrative agency investigations |
| | <p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 873 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="240 304 962 533" style="list-style-type: none"> • Policy Directive 03.03.140 Sexual Abuse and Harassment of Prisoners • Policy Directive 01.01.140 Internal Affairs • Operating Procedure ECF-Oaks Correctional Facility ECF-03.03.140 • MDOC PREA Manual • MDOC Sexual Violence Response and Investigation Guide • PREA Administrator Memo dated July 15, 2022 • Interviews <p data-bbox="240 562 459 591">Analysis/Reasoning</p> <p data-bbox="240 620 1497 913">PD 03.03.140 and the PREA Manual were reviewed by this Auditor in determining compliance with provision (a). These documents indicate that when an allegation of sexual abuse or sexual harassment is received, whether reported verbally or in writing, it shall be investigated. Staff shall ensure all allegations are referred to the appropriate law enforcement agency, the Michigan State Police, in accordance with policy and law for criminal investigation in conjunction with the Department’s administrative investigation. Referrals to law enforcement shall be documented in the Department’s investigative report, PREA investigation worksheet(s) and pertinent computerized database entry(ies). A warden’s or administrator’s designee will refer the allegation no later than 72 hours after the report was made to the Internal Affairs Division by creating the AIPAS entry for each alleged incident. Agency policy requires that all reports, regardless of their source of origination, be taken and referred for investigation.</p> <p data-bbox="240 943 1497 1106">An interview with a facility investigator (Lieutenant) acknowledged that investigations are required to be initiated within 72 hours of report; however, facility practice is generally no less than 24 hours. All reports of sexual abuse and sexual harassment, including anonymous or third-party reports are investigated in the same manner as those allegations that have been directly reported by an alleged victim. A review of investigatory files demonstrates that the facility responds promptly to allegations and initiates investigations after an allegation is made.</p> <p data-bbox="240 1135 1497 1263">This Auditor reviewed a few investigation files, observing that the facility routinely identified and interviewed applicable witnesses, reviewed and saved any pertinent video surveillance, and sought physical evidence in its pursuit of thoroughness. An interview with a facility investigator (Lieutenant) confirmed that it is practice for all parties to be interviewed in-person. Additionally, all inmate interviews are video/audio recorded.</p> <p data-bbox="240 1292 368 1321">Conclusion</p> <p data-bbox="240 1350 1497 1413">This Auditor is satisfied that the ECF conducts investigations consistent with the intended requirements of provision (a) of the standard and its practice demonstrate substantial compliance.</p> |

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| 115.72 | Evidentiary standard for administrative investigations |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • MDOC PREA Manual • Basic Investigator Training Manual • Investigative Files • Interviews <p>Analysis/Reasoning</p> <p>The PREA Manual and the Basic Investigator Training Manual, which were reviewed by this Auditor in determining compliance with provision (a), specify that the agency's standard of proof is to be the preponderance of the evidence. Investigators could articulate their knowledge of the evidentiary standard in investigations. Through a review of investigations, there appears to be sufficient application of this standard to find compliance.</p> <p>Conclusion</p> <p>Based on policy review, investigative file review, and interviews noted above, Oaks Correctional Facility meets requirements of this standard</p> |

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| 115.73 | Reporting to inmates |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1318 495" style="list-style-type: none"> • MDOC PREA Manual • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • Operating Procedure (ECF-03.03.140) Prohibited Sexual Conduct Involving Prisoners • CAJ-1021 Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Findings and Action • ECF PREA Annual Report -May 1, 2021 – April 30, 2022 • Interviews <p data-bbox="242 528 459 557">Analysis/Reasoning</p> <p data-bbox="242 589 1461 712">PD 03.03.140 and the PREA Manual, which were reviewed by this Auditor, dictate that the victim in alleged incidents of sexual abuse will be notified of the investigatory outcome. Both the Warden and Michigan State Police confirm that inmate victims are notified of the investigatory results. This Auditor reviewed a post-audit sample of randomly selected facility investigations and found evidence that victims of sexual abuse were notified of investigatory outcomes in each case.</p> <p data-bbox="242 743 1461 902">PD 03.03.140, OP ECF 03.03.140 and the PREA Manual, which were reviewed by this Auditor, dictate that the assigned investigator shall remain informed about the progress of the criminal investigation and disposition. The Auditor interviewed the PREA Coordinator at the facility and this Auditor reviewed facility investigations to determine there were multiple investigations conducted by MSP during the audit period and observed that notifications were provided consistent with provision (b) of the standard.</p> <p data-bbox="242 934 1461 1093">PD 03.03.140, OP ECF 03.03.140 and the PREA Manual, which were reviewed by this Auditor in determining compliance with provision (c), indicate that the victim in alleged incidents of sexual abuse will be notified of the investigatory outcome. Agency policy was observed to require that notification of the factors enumerated in provision (c) of the standard are provided for Substantiated/Sufficient Evidence and Insufficient Evidence/Unsubstantiated allegations that a staff member sexually abused an inmate. The inmate victims are notified in writing using a department form CAJ-1021.</p> <p data-bbox="242 1124 1461 1216">PD 03.03.140, OP ECF 03.03.140 and the PREA Manual, which were reviewed by this Auditor in determining compliance with provision (d), indicates that the victim in alleged incidents of sexual abuse will be notified of criminal indictments and convictions in compliance with provision (d).</p> <p data-bbox="242 1247 1461 1310">A review of facility investigations yielded ample documentation of its notification of investigatory results. The facility meets provision (e) of the standard by also providing documented notification of sexual harassment investigatory results.</p> <p data-bbox="242 1341 1493 1464">Within all sampled investigations, a completed CAJ-1021 notification form was located as proof of inmate notification to demonstrate compliance with provision (e) of the standard. The PREA Manual specifies that an obligation to notify an inmate of investigatory results terminates if the inmate is discharged from the facility's custody, consistent with provision (f) of the standard.</p> <p data-bbox="242 1496 1469 1657">Of the alleged sexual abuse investigations that were completed in the past 12 months, there were (34) number of inmates who were notified, verbally or in writing, of the results of the investigation; there was (1) number of investigations of alleged inmate sexual abuse in the facility that was completed by an outside agency in the past 12 months; of the outside agency investigation of alleged sexual abuse that was completed in the past 12 months, there was (1) number of inmates alleging sexual abuse in the facility who was notified verbally or in writing of the results of the investigation.</p> <p data-bbox="242 1688 1461 1751">In the past 12 months, there were (34) number of notifications to inmates that were provided pursuant to this standard; of those notifications made in the past 12 months, there were (34) number that were documented.</p> <p data-bbox="242 1783 368 1812">Conclusion</p> <p data-bbox="242 1843 1430 1899">Interviews with the PREA Compliance Manager, Administration, Investigator, and Inmates that Reported Sexual Abuse showed that inmates are receiving notifications.</p> |

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| 115.76 | Disciplinary sanctions for staff |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1281 533" style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • Policy Directive 03.03.130 Humane Treatment and Living Conditions for Prisoners • Policy Directive 02.03.100 Employee Discipline • MDOC PREA Manual • MDOC Employee Handbook • Michigan Penal Code (Act 328 of 1931) 750.520c criminal sexual conduct in the second degree; felony • Interviews <p data-bbox="242 562 459 591">Analysis/Reasoning</p> <p data-bbox="242 620 1493 748">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.</p> <p data-bbox="242 777 1474 904">(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.</p> <p data-bbox="242 934 1477 1164">(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).</p> <p data-bbox="242 1193 1474 1388">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. Based on policy provisions, the auditor determines compliance with provision (d).</p> <p data-bbox="242 1417 1453 1514">In the past 12 months, there were (2) number of staff from the facility who have violated agency sexual abuse or sexual harassment policies; in the past 12 months, there (1) number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="242 1543 1490 1704">In the past 12 months, there were (1) number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse); in the past 12 months, there were (1) number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="242 1733 368 1762">Conclusion</p> <p data-bbox="242 1767 1469 1863">Interview with the Warden, MSP Investigator, and the PREA Compliance support that all allegations against staff for sexual abuse, sexual harassment, retaliation or neglect are investigated and disciplinary action would be commensurate with the circumstances up to termination for sexual abuse. Therefore, this standard is deemed compliant.</p> |

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| 115.77 | Corrective action for contractors and volunteers |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • MDOC PREA Manual • Investigation of Contractual Employees Memo (December 27, 2016) • Interviews <p>Analysis/Reasoning</p> <p>PD 03.03.140 and the PREA Manual, which were reviewed by this 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 prohibited from entering a MDOC 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, this Auditor determines compliance with provision (a).</p> <p>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 inmate contact or the facility depending on substantiation of the allegations. There were no examples of a contractor being disciplined for violation of PREA during the 12 months preceding this audit. Based upon policy provisions and the Warden's interview, this Auditor determines compliance with provision (b).</p> <p>Conclusion</p> <p>The interview with the Warden confirmed that he is able and willing to temporarily suspend volunteers and contractual staff from entering the facility if there is a suspicion of misbehavior. After analysis of this documentation, policy, and interview, the auditor finds the standard to be compliance.</p> |

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| 115.78 | Disciplinary sanctions for inmates |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1098 432" style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • Policy Directive 03.03.105 Prisoner Discipline • MDOC PREA Manual • Interviews <p data-bbox="242 461 459 490">Analysis/Reasoning</p> <p data-bbox="242 519 1490 613">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.</p> <p data-bbox="242 642 1457 736">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.</p> <p data-bbox="242 766 1481 860">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.</p> <p data-bbox="242 889 1481 952">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.</p> <p data-bbox="242 981 1481 1075">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. Administration indicated that there have not been any inmate-on-staff sexual assaults, thus no discipline has been issued regarding this standard.</p> <p data-bbox="242 1104 1445 1167">PREA Administrator and PREA Coordinator indicated knowledge that this requirement must be met if/when an allegation occurs.</p> <p data-bbox="242 1196 1485 1323">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).</p> <p data-bbox="242 1352 1481 1382">PREA Manager and PREA Coordinator indicated knowledge that this requirement must be met if/when an allegation occurs.</p> <p data-bbox="242 1411 1469 1608">Through a review of the PREA Manual, the Prisoner Guidebook and interviews with the PREA Manager 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).</p> <p data-bbox="242 1637 1490 1731">Review of available documentation coupled with Random Staff, Inmate, PREA Coordinator, Investigators, and Administration interviews indicated that inmates were only subject to disciplinary action when there was substantial evidence that the alleged allegation did not occur and the allegation was not made in good faith.</p> <p data-bbox="242 1760 368 1789">Conclusion</p> <p data-bbox="242 1818 1433 1881">Oaks Correctional Facility had no administrative findings of inmate-on-inmate sexual abuse that occurred in the past 12 months. Based on policy review and interviews Oaks Correctional Facility meets requirements of this standard.</p> |

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| 115.81 | Medical and mental health screenings; history of sexual abuse |
| | <p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 1099 562" style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • Policy Directive 03.04.100 Health Services • Policy Directive 03.04.108 Prisoner Health Information • Policy Directive 04.01.105 Reception Facility Services • MDOC PREA Manual • CAJ 1028 Authorization for Release of Information • Informed Consent Poster • Interviews <p data-bbox="242 595 459 624">Analysis/Reasoning</p> <p data-bbox="242 651 1485 880">The above policies were reviewed including the PREA Manual which indicates that regarding 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. PD 03.03.140 was reviewed which indicates that prisoners identified as having a history of physical or sexual abuse, or who pose a reasonable concern that they may be sexually victimized while incarcerated due to age, physical stature, history, or physical or mental disabilities shall be similarly referred as set forth in PD 04.01.105.</p> <p data-bbox="242 909 1485 1037">PD 03.04.100 was reviewed which indicates that all prisoners shall have access to health services as described in this policy, regardless of custody level or security classification. A prisoner whose health care needs cannot be met at the facility where the prisoner is housed shall be transferred to a facility where those needs can be met, consistent with PD 05.01.140 "Prisoner Placement and Transfer."</p> <p data-bbox="242 1066 1485 1193">PD 04.01.105 was reviewed which indicates that a prisoner identified as having a history of physical or sexual abuse, or who poses a reasonable concern that s/he may be sexually victimized while incarcerated due to age, physical stature, history, or physical or mental disabilities shall be referred to BHCS psychological services staff; the Intake Screening for History of Sexual or Physical Abuse form (CHJ-464) shall be completed by BHCS staff as part of this screening process.</p> <p data-bbox="242 1223 1485 1391">PD 04.06.180 was reviewed which indicates that 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. Additionally, the following institutional services are provided by QMHP's to prisoners as clinically indicated: 1. Mental health intake evaluations; and 2. Crisis intervention. Policy is consistent with the requirements of the provision.</p> <p data-bbox="242 1420 1485 1615">Pre-audit, the facility responded positively in the questionnaire that all inmates at ECF who have disclosed any prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioner. The follow up meeting is offered within 14-days of the intake screening. In the past 12-months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Medical and mental health staff maintain secondary materials documenting compliance with the above required services.</p> <p data-bbox="242 1644 1485 1771">The PAQ notes that 100% of incarcerated individuals who disclosed prior victimization during screening were offered a follow-up meeting with medical or mental health, and 100% of incarcerated individuals who have previously perpetrated sexual abuse during the screening were offered a follow-up meeting with a mental health practitioner. The auditor finds this credible based on the process for intake.</p> <p data-bbox="242 1800 368 1830">Conclusion</p> <p data-bbox="242 1859 1485 1921">Based on interviews with medical staff and mental health staff the policies described in above narrative and document review, Oaks Correctional Facility meets all requirements of this standard.</p> |

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| 115.82 | Access to emergency medical and mental health services |
| | Auditor Overall Determination: Meets Standard |
| | <p>Auditor Discussion</p> <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.04.100 Health Services • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • Policy Directive 04.01.125 Medical Emergencies • MDOC PREA Manual • MDOC Hepatitis Brochure • MDOC HIV Brochure • Interviews <p>Analysis/Reasoning</p> <p>This Auditor reviewed PD 03.03.140, PD 03.04.125, PD 04.06.180, OP 03.04.100H, OP ECF 03.04.125 and the PREA Manual, which combine to form the agency and facility’s policy to ensure victims of sexual abuse are provided timely and unimpeded access to medical, mental health care and crisis intervention services at no expense. The standard of care is required to be consistent with community standards and is determined by the judgement of the practitioner. Interviews with mental health staff confirm that a response occurs within 24 hours of an allegation of sexual abuse and that services are delivered according to the clinical judgment of the practitioner. Medical staff confirmed that responses are conducted immediately and that services are delivered according to the clinical judgment of the practitioner.</p> <p>Through a review of post-audit sample documentation of random investigation files selected by this Auditor, it was evident that the facility has an established practice of providing timely and unimpeded access to emergency medical and crisis intervention services according to the professional judgement of clinicians when emergency responses were required.</p> <p>The investigations confirm that it is the routine practice of the ECF to promptly escort an inmate alleging sexual abuse victimization to medical, and refer all alleged victims for mental health services. Specific evidence relied upon to determine compliance was found in sampled investigation AIPAS #26369, which occurred during the 12 months preceding this audit.</p> <p>Random staff interviews and informal interviews during the audit tour confirm that security staff are aware of their need to contact medical providers upon learning of a sexual abuse allegation. The PREA Manual, PD 03.04.100 and agency PREA brochure were reviewed by this Auditor in determining compliance with this standard The PREA Manual contains language that mirrors the standard and the brochure provides instructions for inmates to access such services.</p> <p>This Auditor reviewed PD 03.03.100 and the PREA Manual, which ensure victims of sexual abuse are provided timely and unimpeded access to medical, mental health care and crisis intervention services at no expense.</p> <p>Conclusion</p> <p>Based on policy provisions, this Auditor determines compliance with the standard.</p> |

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| 115.83 | Ongoing medical and mental health care for sexual abuse victims and abusers |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="242 208 451 235">Auditor Discussion</p> <p data-bbox="242 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="242 304 756 465" style="list-style-type: none"> • Policy Directive 03.04.100 Health Services • Policy Directive 03.04.100 Health Services • Policy Directive 04.06.180 Mental Health Services • MDOC PREA Manual • Interviews <p data-bbox="242 495 459 521">Analysis/Reasoning</p> <p data-bbox="242 553 1477 712">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 being offered to the offenders. Examples of referrals to health care and mental health were provided to this auditor for review. The auditor reviewed agency policies 03.04.140, 03.04.125, 04.06.180 and the PREA Manual, which combine to form the agency's approach to providing required medical and mental health services for victims of sexual abuse.</p> <p data-bbox="242 741 1477 1003">The auditor reviewed agency policies 03.04.100, 04.06.180 and the PREA Manual, which combine to adequately outline the agency's approach to providing appropriate medical and mental health services to victims of sexual abuse. An interview with a facility medical provider confirmed that a physician would examine an alleged victim and make appropriate decisions to treat injuries, infections, STIs, etc. An interview with facility mental health staff confirmed that an assessment would be made and applicable referrals for psychiatric medication and crisis stabilization would occur, as individuals would be seen for five (5) consecutive business days following an allegation. 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 being offered to the offenders.</p> <p data-bbox="242 1032 1485 1294">Interviews with mental health staff confirm that services are delivered according to the clinical judgment of the practitioner. Both, medical and mental health staff stated that their belief that services each specialty provided at the facility exceeds community levels of care. Each cited the immediate availability of services and a broad range of available services that are typically waitlisted in the community, allowing the auditor to determine compliance with provision (c) of the standard. Random Staff, Administration, Staff Lieutenant 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 being offered to the offenders.</p> <p data-bbox="242 1323 1477 1451">The auditor reviewed the PREA Manual which specifies that victims of vaginal penetration are offered pregnancy tests. If the test is positive, the victim will receive timely and comprehensive information and access to all lawful pregnancy related services. ECF does not house female inmates. Based on policy provisions and the absence of evidence of non-compliance, the auditor determines compliance with provision (d) of the standard.</p> <p data-bbox="242 1480 1485 1709">The auditor reviewed agency policy 03.04.100 and the PREA Manual, which state that victims of sexual abuse will be offered testing for sexually transmitted infections as medically appropriate with respect to provision (f) of this standard. Although noted under provision (a) that evidence does exist to demonstrate that some allegations involving sexual abuse without penetration (i.e., pat search related allegations) or sexual abuse without contact (sexual threats) eluded medical and mental health referrals; the auditor found no evidence that allegations involving penetration that were not appropriately referred for medical services. A sampling of documentation verifying prisoner's testing for Sexually Transmitted Diseases was provided to this auditor for review.</p> <p data-bbox="242 1738 1477 1966">The auditor reviewed agency policy 03.04.100 and the PREA Manual, which specify that treatment is provided to victims of sexual abuse, free of charge, regardless of their cooperation with any ensuing investigation. Based on policy provisions, the auditor determines compliance with provision (g) of the standard. (h) The PREA Manual, which was reviewed by the auditor, states that within 60 days of learning of prisoner-on-prisoner abuser, the facility mental health staff will conduct a mental health evaluation of the abuser's history and offer treatment as deemed appropriate. Mental health staff reported during an interview that evaluative procedures are in place to address known inmate-on-inmate abusers for applicable treatment modalities.</p> <p data-bbox="242 1995 368 2022">Conclusion</p> <p data-bbox="242 2029 1358 2056">Based on policy provisions and interviews, the auditor determines compliance with provision (h) of the standard.</p> |

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| 115.86 | Sexual abuse incident reviews |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • MDOC PREA Manual • CAJ 1025 Sexual Abuse Incident Review • Interviews <p>Analysis/Reasoning</p> <p>The PREA Manual, states that 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. The PAQ indicated that there have been 17 sexual abuse investigations completed within the previous twelve months, excluding those that were unfounded. The PAQ indicated that 17 sexual abuse reviews were completed within the previous twelve months within 30 days of the conclusion of the investigation. A review of (17) sexual abuse investigations revealed that ten (10) were unfounded and did not require a review. Of the seven remaining investigations all had a completed PREA Sexual Abuse Incident Review Form (CAJ-1025).</p> <p>The PREA Manual, states that such reviews shall generally occur within 30 calendar days after the conclusion of the investigation. The PAQ indicated that there have been (17) sexual abuse investigations completed within the previous twelve months, excluding those that were unfounded. The PAQ indicated that (17) sexual abuse reviews were completed within the previous twelve months within 30 days of the conclusion of the investigation. A review of (17) sexual abuse investigations revealed that ten (10) were unfounded and did not require a review. Of the seven (7) remaining investigations all had a completed PREA Sexual Abuse Incident Review Form (CAJ-1025).</p> <p>The PREA Manual, indicates that the review team shall upper-level custody and administrative staff, with input from relevant supervisors, investigators and medical and mental health practitioners. A review of the completed CAJ-1025s indicated that the Warden, the PC, the investigators, supervisory staff, medical staff and mental health staff typically participate in the reviews. The interview with the Warden confirmed that these reviews are being completed and they include upper-level management officials, supervisors, investigators and medical and mental health practitioners.</p> <p>Agency form CAJ-1025, which was reviewed by the auditor, mirrors the standard language to confirm that the facility must consider the six factors required by provision (d) of the standard in order to complete the agency review form. Interviews with the Warden and facility PREA Coordinator confirms that Oaks Correctional Facility's review team considers the six factors enumerated under provision (d) of the standard in its review process. Based on interviews and policy, the auditor determines compliance with provision (d) of the standard.</p> <p>The PREA Manual, indicates that the Warden shall review and forward through the chain of command to the Deputy Director or designee for consideration any recommendations for improvement. A review of CAJ-1025 indicated that a section exists for recommendations and corrective action. A review of the seven (7) completed CAJ-1025 forms confirmed that each had a section for recommendations and corrective action.</p> <p>Conclusion</p> <p>Based on a review of the PAQ, the PREA Manual, a review of CAJ-1025 forms and information from interviews with the Warden, PC, and a member of the sexual abuse incident review team this standard appears to meet the standard.</p> |

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| 115.87 | Data collection |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul style="list-style-type: none"> • Policy Directive 03.03.140 PREA and Prohibited Sexual Conduct Involving Prisoners • MDOC PREA Manual • 2020 Survey of Sexual Victimization (SSV) • Interviews <p>Analysis/Reasoning</p> <p>The PREA Manual, outlines the data collection process. It states that each allegation of sexual abuse reported to have occurred within Department facilities shall be entered into the appropriate MDOC computerized database. Additionally, it indicates that the Department PREA Manager gathers data on each reported incident to aggregate an annual incident report. The report will include, at minimum, the data necessary to complete the SSV. A review of the PREA Manual and PD 03.03.140 indicates they contain the definitions used to collect data at each facility. The agency reports their data annually to the DOJ via the SSV. A review of the agency website confirmed that SSV data is available from 2013 to current.</p> <p>The PREA Manual, states that the Department PREA Manager gathers data on each reported incident to aggregate an annual incident report. The agency reports their data annually to the DOJ via the SSV. The PAQ indicated that the agency aggregates the incident based sexual abuse data at least annually. A review of the agency website confirmed that SSV data is available from 2013 to current.</p> <p>The PREA Manual, page outlines the data collection process. It states that each allegation of sexual abuse reported to have occurred within Department facilities shall be entered into the appropriate MDOC computerized database. Additionally, it indicates that the Department PREA Manager gathers data on each reported incident to aggregate an annual incident report. The report will include, at minimum, the data necessary to complete the SSV. A review of the PREA Manual and PD 03.03.140 indicates they contain the definitions used to collect data at each facility. The agency reports their data annually to the DOJ via the SSV. A review of the agency website confirmed that SSV data is available from 2013 to current.</p> <p>The PREA Manual, outlines the data collection process. It states that each allegation of sexual abuse reported to have occurred within Department facilities shall be entered into the appropriate MDOC computerized database. Additionally, it indicates that the Department PREA Manager gathers data on each reported incident to aggregate an annual incident report. The PAQ indicated that the agency maintains, reviews and collects data as needed from all available incident-based documents.</p> <p>The PAQ as well as the PREA Manual, indicates that the agency obtains incident based and aggregated data from every private facility with which it contracts for the confinement of its inmate.</p> <p>The PAQ as well as the PREA Manual, indicate that the Department provides the data to the Department of Justice from the previous calendar year no later than June 30th. A review of the Survey of Sexual Victimization indicated that the last survey was submitted in 2020.</p> <p>Conclusion</p> <p>Based on a review of the PAQ, PD 03.03.140, the PREA Manual and the Survey of Sexual Victimization this standard is compliant.</p> |

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| 115.88 | Data review for corrective action |
| | <p data-bbox="240 143 740 172">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 871 300">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="240 302 477 396" style="list-style-type: none"> • MDOC PREA Manual • Annual Reports • Interviews <p data-bbox="240 427 459 456">Analysis/Reasoning</p> <p data-bbox="240 486 1485 880">The PREA Manual, and the PAQ indicate that the agency reviews data annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies and training. The review includes identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings and any corrective action. A review of Annual Reports indicates that the report contains information on the MDOC's PREA efforts to include the actions taken in response to the previous year's PREA audits. The reports contain a comparison of collected data from the previous two years. The reports were reviewed and approved by the PREA Manager and the Agency Head. The interview with the Agency Head Designee indicated that there are many ways that data is utilized to assess and improve the Department's sexual safety practices. This includes sexual abuse incident reviews, the Annual Report, the Survey of Sexual Victimization and the annual review by the Wardens at each facility related to their staffing plans. All of this information is then utilized to identify any trends and improve or update policies, procedures and practices. The Prea Coordinator and the PREA Manager indicate that each facility documents allegations and investigations in the centralized database which is used to review trends and any areas of concern.</p> <p data-bbox="240 911 1485 1039">The PREA Manual, and the PAQ indicated that the agency's Annual Report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the progress. A review of Annual Reports indicates that the report contains information on the MDOC's PREA efforts to include the actions taken in response to the previous year's PREA audits. The report contains a comparison of collected data from the previous two years.</p> <p data-bbox="240 1070 1458 1198">The PAQ indicated that the agency's Annual Report is approved by the Agency Head and made available to the public through its website. The reports were reviewed and approved by the PREA Manager and the Agency Head. The interview with the Agency Head Designee confirmed that after it is approved it is published on the agency website. A review of the website confirmed that current and previous Annual Reports are available to the public online.</p> <p data-bbox="240 1229 1469 1323">The PAQ indicated that the agency may redact specific material from the report when it would present a clear and specific threat to the safety and security of the facility. A review of Annual Reports confirmed that no information was required to be redacted. The interview with the PC indicated that all personally identifiable information would be redacted if necessary.</p> <p data-bbox="240 1355 368 1384">Conclusion</p> <p data-bbox="240 1413 1477 1471">Based on a review of the PAQ, the PREA Manual, Annual Reports, the agency website and information from interviews with the Agency Head Designee, PC and CM, this standard appears to be compliant.</p> |

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| 115.89 | Data storage, publication, and destruction |
| | Auditor Overall Determination: Meets Standard |
| | <p data-bbox="244 208 451 235">Auditor Discussion</p> <p data-bbox="244 271 871 297">Policy, Materials, Interviews and Other Evidence Reviewed</p> <ul data-bbox="244 304 475 360" style="list-style-type: none"> • MDOC PREA Manual • Interviews <p data-bbox="244 396 459 423">Analysis/Reasoning</p> <p data-bbox="244 454 1485 577">The PREA Manual, states that the Department shall ensure that all sexual abuse and sexual harassment data collected is securely retained. The PAQ as well as the interview with the PREA Coordinator confirmed that data is securely retained. The PC indicated that all electronic data is maintained in a centralized system and all paper files are under lock and key at the facility and central office.</p> <p data-bbox="244 611 1490 768">The PAQ states that the agency will make all aggregated sexual abuse data readily available to the public annually through its website. A review of the website confirmed that the most current (2018) Survey of Sexual Victimization as well as previous Annual Reports (aggregated data) are available to the public online. The agency does not include any identifiable information or sensitive information on the Annual Report and as such does not require any information to be redacted. A review of historical Annual Reports confirmed that no personal identifiers were publicly available.</p> <p data-bbox="244 801 1477 896">The PREA Manual, states that the Department shall maintain sexual abuse data collected pursuant to the data collection section of this manual for at least ten years after the date of the initial collection. A review of the agency's website confirmed that data is available from 2014 to present.</p> <p data-bbox="244 929 368 956">Conclusion</p> <p data-bbox="244 963 1465 1019">Based on a review of the PAQ, the PREA Manual, the agency website and information obtained from the interview with the PREA Coordinator, this standard appears to be compliant.</p> |

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| 115.401 | Frequency and scope of audits |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The facility is part of the Michigan Department of Corrections. All MDOC facilities were audited in the previous three-year audit cycle. The auditor had access to all areas of the facility; was permitted to receive and copy any relevant policies, procedure or documents; was permitted to conduct private interviews and was able to receive confidential information/correspondence from inmates. The audit team received complete cooperation with the MDOC, ECF prison staff, and offenders at the prison. Policy and Procedures and secondary documentation were provided well before the onsite tour.</p> |

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| 115.403 | Audit contents and findings |
| | Auditor Overall Determination: Meets Standard |
| | Auditor Discussion |
| | <p>The facility was previously audited on June 20, 2020 it report is publicly available via their website https://www.michigan.gov/documents/corrections/Oaks_Correctional_Final_Report_671288_7.pdf</p> |

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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| 115.53 (a) | Inmate access to outside confidential support services | |
| | Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? | yes |
| | Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.) | yes |
| | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? | yes |
| 115.53 (b) | Inmate access to outside confidential support services | |
| | Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? | yes |
| 115.53 (c) | Inmate access to outside confidential support services | |
| | Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? | yes |
| | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? | yes |
| 115.54 (a) | Third-party reporting | |
| | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? | yes |
| | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? | yes |
| 115.61 (a) | Staff and agency reporting duties | |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? | yes |
| | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? | yes |
| 115.61 (b) | Staff and agency reporting duties | |
| | Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? | yes |

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

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

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

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

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

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

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

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

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

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

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