

# PREA Facility Audit Report: Final

**Name of Facility:** Macomb Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 07/02/2024

**Date Final Report Submitted:** 10/02/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Ron L Kidwell	<b>Date of Signature:</b> 10/02/2024

AUDITOR INFORMATION	
<b>Auditor name:</b>	Kidwell, Ron
<b>Email:</b>	ronnie.kidwell@yahoo.com
<b>Start Date of On-Site Audit:</b>	04/15/2024
<b>End Date of On-Site Audit:</b>	04/17/2024

FACILITY INFORMATION	
<b>Facility name:</b>	Macomb Correctional Facility
<b>Facility physical address:</b>	34625 26 Mile Road, Lenox, Michigan - 48048
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Eric Herbert
<b>Email Address:</b>	Herbert2@michigan.gov
<b>Telephone Number:</b>	586-749-4900

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Jeffrey Tanner
<b>Email Address:</b>	tannerj1@michigan.gov
<b>Telephone Number:</b>	586-749-4900 ex 2501

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Erin Parr-Mirza
<b>Email Address:</b>	parr-mirzae@michigan.gov
<b>Telephone Number:</b>	586-749-4900 Ex 2501

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1285
<b>Current population of facility:</b>	1260
<b>Average daily population for the past 12 months:</b>	1270
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males

<b>Age range of population:</b>	over 18
<b>Facility security levels/inmate custody levels:</b>	1,2,4, IV RTP and Parole Violator
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	361
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	85
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	101

### AGENCY INFORMATION

<b>Name of agency:</b>	Michigan Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	State of Michigan
<b>Physical Address:</b>	206 East Michigan Avenue, Lansing, Michigan - 48933
<b>Mailing Address:</b>	
<b>Telephone number:</b>	5173733966

### Agency Chief Executive Officer Information:

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

### Agency-Wide PREA Coordinator Information

<b>Name:</b>	CJ Carlson	<b>Email Address:</b>	CarlsonC2@michigan.gov
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## Facility AUDIT FINDINGS

### Summary of Audit Findings

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

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

#### Number of standards exceeded:

0

#### Number of standards met:

45

#### Number of standards not met:

0

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-04-15
2. End date of the onsite portion of the audit:	2024-04-17

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The Auditor contacted Just Detention International who also provides victim advocacy for the state of Michigan

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1285
15. Average daily population for the past 12 months:	1270
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**

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1260
<b>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:</b>	68
<b>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:</b>	18
<b>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:</b>	2
<b>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:</b>	138
<b>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:</b>	1
<b>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:</b>	33

<p><b>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:</b></p>	<p>33</p>
<p><b>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:</b></p>	<p>7</p>
<p><b>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:</b></p>	<p>3</p>
<p><b>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:</b></p>	<p>0</p>
<p><b>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):</b></p>	<p>The Auditor began conducting random and targeted prisoner interviews on the second day of the on-site audit. The Auditor was provided a private area to conduct the confidential interviews. All prisoners were made available in a timely manner and no prisoners refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>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:</b></p>	<p>361</p>
<p><b>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:</b></p>	<p>85</p>

<p><b>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:</b></p>	<p>101</p>
<p><b>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:</b></p>	<p>The Auditor began conducting random and specialized staff interviews immediately following the completion of the on-site facility tour. The Auditor was provided a private area to conduct the confidential interviews. All staff were made available in a timely manner and no staff refused to be interviewed by the Auditor. All interviews were conducted using the established DOJ interview protocols.</p>
<p><b>INTERVIEWS</b></p>	
<p><b>Inmate/Resident/Detainee Interviews</b></p>	
<p><b>Random Inmate/Resident/Detainee Interviews</b></p>	
<p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>20</p>
<p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p> <input checked="" type="checkbox"/> Age  <input checked="" type="checkbox"/> Race  <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)  <input type="checkbox"/> Length of time in the facility  <input checked="" type="checkbox"/> Housing assignment  <input type="checkbox"/> Gender  <input type="checkbox"/> Other  <input type="checkbox"/> None </p>

<p><b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>Prisoners were selected from all housing units, using the prisoner cell assignment report. The Auditor went down the list of each housing unit and selected the a prisoner's name from all housing units. The Auditor also ensured that a representative sample of inmates based on race, age, and ethnicity were selected.</p>
<p><b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p><b>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):</b></p>	<p>There were no barriers to interviewing the random or targeted prisoners.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>24</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><b>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:</b></p>	<p>3</p>

<p><b>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:</b></p>	<p>3</p>
<p><b>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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></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>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).</b></p>	<p>The facility reported that they were not currently housing any prisoners that are blind or have low vision. The Auditor met with the PREA Compliance Manager and reviewed the list of prisoners housed in the facility that requested accommodations, given a particular disability. The Auditor found no evidence of any prisoner listed with disabilities regarding vision issues.</p>
<p><b>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:</b></p>	<p>1</p>
<p><b>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:</b></p>	<p>1</p>

<b>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:</b>	2
<b>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:</b>	3
<b>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:</b>	7
<b>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:</b>	3
<b>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:</b>	1

<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>The Auditor interviewed 24 targeted prisoners at the MRF. Of those inmates interviewed, 3 reported sexual victimization during the risk screening process, 7 reported sexual abuse, 3 physically disabled, 3 cognitively disabled, 1 hearing impaired, 0 blind or low vision, 1 prisoner that was limited English proficient, 2 prisoners that identified as gay or bisexual, 1 prisoner housed in segregation as a means of separation due to a report of sexual abuse, and 3 transgender prisoners. The MRF does not house youthful prisoners and reported no prisoners housed in segregation for high risk of sexual abuse. The Auditor received five correspondences from prisoners at the MRF for this audit through the mail and spoke to four of the five prisoners during the on-site portion of this audit. The fifth prisoner was no longer being housed at that facility.</p>
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**Staff, Volunteer, and Contractor Interviews**

**Random Staff Interviews**

<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>13</p>
<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>If "Other," describe:</b></p>	<p>The Auditor ensured that female officers were interviewed to provide their point of view working at this facility.</p>

<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>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):</b></p>	<p>The staff were randomly selected by the PREA Auditor. The Auditor chose staff from all shifts, working different assignments, and with different levels of experience. The Auditor also made sure interviews were conducted with a proportionate number of female staff corresponding to the LADC's employee demographics.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>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.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>19</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>a. Explain why it was not possible to interview the Agency Head:</b></p>	<p>The Auditor interviewed the Agency Head Designee</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

**79. Were you able to interview the PREA Compliance Manager?**

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

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

## SITE REVIEW AND DOCUMENTATION SAMPLING

### Site Review

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

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

Yes

No

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

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

Yes

No

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

Yes

No

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

Yes

No

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

Yes

No

**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).**

On 04/15/2024, at approximately 0830 hours a PREA audit kickoff meeting was conducted. Present at the meeting was the Warden, Deputy Warden, Statewide MDOC PREA Manager, MDOC Departmental Analyst, three MDOC PREA Analysts, Facility PREA Coordinator, Contract Monitor, and Departmental Specialist. The prisoner population on 4/15/2024 was 1260 prisoners. The meeting was designed to create a positive working relationship, place names with faces, and prepare for the next three days. Soon after the conclusion of the meeting the Auditor began the facility observation tour. Accompanied by the Warden, the PREA Regional Analyst, Facility PREA Coordinator, and PREA Manager, the tour covered the entire facility over the next 3 hours. The tour covered the Front Entrance, Receiving and Intake, Food Services/Kitchen, Laundry, Gym, Program Classrooms, and all housing units. There is also one segregation housing unit that contains twenty-two single occupancy cells. During the facility tour, the Auditor looked at camera placement for possible blind spots and prisoner to officer supervision ratio. The Auditor looked at privacy issues, how the toilet and shower areas were configured, and did the prisoners have adequate privacy. Also, did staff of the opposite gender announce their presence when entering a housing unit of the opposite sex. The Auditor documented if PREA posters and PREA audit notices were displayed in the housing units and public areas as well. The Auditor noted the number of phones in each unit and if the advocacy hotline number along with the outside reporting entity contact information was readily available in the housing units. The Auditor also conducted several test calls to the outside entity to prove the effectiveness of the facility's practice to report sexual abuse to an outside entity and provide advocacy to any prisoner wanting that service as it relates to sexual abuse. Finally, the Auditor spoke to multiple prisoners about if they knew how to report an

allegation of sexual abuse. conducting specialized interviews. At the Exit-Briefing the Auditor identified several recommendations that were shared with staff that was in attendance. Present at the Exit-Briefing was the Deputy Warden, Unit Chief, PREA Manager, Regional PREA Analysts, Inspector, and Administrative Assistant.

### 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?**

Yes

No

**91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).**

At the conclusion of the third day of the audit, the Auditor reviewed a total of 55 files. Those files consisted of 24 prisoner files, 12 staff personnel files, and 20 investigative files. The prisoner files consisted of those prisoners that had been previously interviewed during the audit. The staff personnel files were selected from those officers the Auditor had previously interviewed. In the staff personnel files, the Auditor was looking for evidence of an initial criminal history check, institutional references, 5 years background check, PREA training documentation, and PREA refresher training. In regard to prisoner files the Auditor would confirm evidence of the PREA Intake Screening taken place within 72 hours, proof of a reassessment, PREA information provided at Intake, and if the prisoner received their comprehensive education within 30 days of Intake. Finally, when reviewing the investigative files, the Auditor was looking for a complete administrative investigation. This would include the investigative outcome, retaliation monitoring, if a Sexual Abuse Incident Review was conducted, was the preponderance of the evidence used, victims, witnesses, and perpetrator interviewed among many other factors.

## **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:**

	<b># of sexual abuse allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual abuse</b>	32	11	21	11
<b>Staff-on-inmate sexual abuse</b>	34	0	34	0
<b>Total</b>	66	11	55	11

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

	<b># of sexual harassment allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual harassment</b>	22	0	22	0
<b>Staff-on-inmate sexual harassment</b>	30	0	33	0
<b>Total</b>	52	0	52	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
<b>Inmate-on-inmate sexual abuse</b>	2	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Total</b>	2	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	2	0	30	0
<b>Staff-on-inmate sexual abuse</b>	0	0	34	0
<b>Total</b>	2	0	64	0

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	20	2
<b>Staff-on-inmate sexual harassment</b>	0	0	30	0
<b>Total</b>	0	0	50	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:**

14

<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>8</p>
<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></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><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>6</p>
<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></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><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>6</p>
<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></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 sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>3</p>
<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></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>
<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></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>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	3
<b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	It appears through investigative file review and interviews conducted with the Facility Investigator and Michigan State Police, all allegations regarding sexual abuse is initially inquired and the information gathered is sent to the Michigan State Police to determine if probable cause exists to initiate a criminal investigation.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>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.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

<b>Non-certified Support Staff</b>	
<p><b>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.</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:</b></p>	<p>1</p>
<b>AUDITING ARRANGEMENTS AND COMPENSATION</b>	
<p><b>121. Who paid you to conduct this audit?</b></p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><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)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p><b>Identify the name of the third-party auditing entity</b></p>	<p>A&amp;B Management &amp; Consulting LLC</p>

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li>   <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li>   <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) Director’s Office Memorandum regarding the PREA Manual dated 12/5/2016</li> <li>b) Macomb Correctional Facility (MRF) Operating Procedure 03.03.140 (Prison Rape Elimination Act) PREA</li> <li>c) Michigan Department of Corrections (MDOC) Policy Directive 03.03.140 (PREA)</li> <li>d) MDOC PREA Manual</li> <li>e) MDOC Budget &amp; Operations, Administration, Procurement, Monitoring and Compliance Division Organizational Chart</li> <li>f) PREA Administrator Manager Position Description.</li> </ul>

g) PREA Coordinator Organization Chart

h) MRF Warden Organizational Chart

Interview:

1. Interview with PREA Coordinator (PREA Administrator/Manager)

2. Interview with MRF PREA Coordinator (Facility Coordinator)

Observations made during the On-Site Audit and Document Review

115.11 Provision (a)

The agency has provided a written policy MDOC PD 03.03.140 that indicates that; “pursuant to the Prison Rape Elimination Act of 2003 (PREA), this policy details the Department’s zero-tolerance standard toward all forms of sexual abuse and sexual harassment involving prisoners and outlines the Department’s approach to preventing, detecting, and responding to such conduct.” The policy further states that, “PREA addresses prisoner-on-prisoner sexual abuse and sexual harassment, employee sexual abuse of prisoners, and employee sexual harassment of prisoners. The Department has zero tolerance for sexual abuse and sexual harassment of prisoners.”

This policy also outlines how it will implement the MDOC’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Such as employing a PREA Manager and Facility Coordinators with enough time and authority to oversee the prisons efforts to comply with PREA standards. In addition, the definitions associated with prohibited behaviors are also present in this agency policy. For example: the definition of sexual abuse, sexual harassment, and voyeurism. The policy also addresses sanctions for those who violate the PREA policy with discipline up to, and including, termination. Finally, the MDOC PREA Policy in its entirety incorporates the necessary fundamentals needed to describe MDOC’s approach to detecting, preventing, and responding to allegations of sexual abuse and sexual harassment.

The facility also offered the MDOC PREA Manual that states, “MDOC Policy Directive (PD) 03.03.140 Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners establishes a zero-tolerance policy of sexual violence against prisoners. Each allegation must be taken seriously and be addressed in an appropriate, timely, thorough, and consistent manner. This manual was developed to enhance existing policy and clarify the scope and implementation requirements of PREA. In the unlikely event Department policy conflicts with this manual, the MDOC PREA Manual takes precedence.”

The evidence collected for this provision shows that the agency has a written policy mandating zero tolerance towards all forms of sexual abuse. The policy also outlines the agency’s approach to detecting, preventing, and responding to sexual abuse. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.11 Provision (b)

The MDOC provided an organizational chart that I reviewed. I observed that the State PREA Manager is subordinate to the State Office Administrator who is supervised by the Deputy Director of the MDOC. Therefore, the Deputy Director falls directly under the supervision and control of The Director of the Department of Corrections. Thus, providing upper-level management positions to develop and implement oversight for the facility's compliance with PREA standards.

An interview was conducted with the MDOC's PREA Manager and he was asked whether he felt like he had enough time to manage all of his PREA related responsibilities. The PREA Manager stated that he did have sufficient time and that the agency was more than accommodating to his needs and time to coordinate PREA related standards. He further stated that he coordinates the effort to comply with PREA standards by ensuring the appropriate training takes place and monitors the standards for any changes or modifications. He also stated that he oversees approximately 27 PREA Facility Coordinators, located at every DOC facility, and 3 PREA Regional Analysts that are responsible for PREA oversight on a select number of correctional facilities located in their region of Michigan. He stated this next level of supervision has been significant to the success of PREA compliance in the MDOC.

The evidence collected for this provision shows that the agency has demonstrated that they employ an upper level PREA Coordinator with enough time and authority to develop, implement, and oversee agency efforts to comply with PREA standards. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.11 Provision (c)

MDOC is a State Correctional System that operates twenty-eight separate confinement facilities. The facility has provided MRF Operating Procedure 03.03.140 that outlines the responsibilities of the PREA Facility Coordinator. The policy states in part that; "The Warden has designated (1) Inspector and (1) Captain as the Prison Rape Elimination Act (PREA) Coordinators. The PREA Coordinators shall have sufficient time and authority to coordinate the facility's efforts to comply with the standards outlined in the PREA Manual and shall be responsible for monitoring and providing assistance regarding all aspects of PREA compliance in areas such as training, education, reporting, documentation, and investigation of PREA related allegations." The PREA Manager provided a list of the two separate regions of Michigan along with their Analyst's names and contact information. The Regional Analysts answer to the PREA Manager. The Facility Coordinators have specific responsibilities such as: maintaining necessary documentation of all PREA standard compliance efforts, act as primary facility contacts for the PREA Analyst in coordinating compliance and ensure compliance with all PREA relative departmental policies and procedures. Also, they will provide feedback to the Warden and Regional Analyst concerning policies, procedures, and/or practices that are not in compliance with PREA Standards.

In addition, MDOC has established PREA Regional Analysts. The PREA Regional Analyst's position is responsible for coordinating the facilities/regions comprehensive

PREA response including technical and administrative guidance, creation of supporting policies and practices, design and modification of training, programming, investigation, analysis, and interpretation relative to PREA implementation, compliance, and investigation. Also, they help craft and orchestrate strategies to ensure appropriate environments/cultures, and enforcement of policies, procedures, practices and standards for the prevention, detection, and reduction of prison rape, ensuring proper reporting, trend evaluation and provision of recommendations for improvement and compliance.

An interview was conducted with a Facility Coordinator, and he was asked if he felt that he had enough time to manage all the PREA-related responsibilities. The Facility Coordinator stated that, “He carves out time for PREA and makes it a priority however, due to many other job responsibilities and other obligations, it does make it difficult to find enough sufficient time to perform the duties required.” Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

Recommendation: The Auditor is recommending that the facility look into the responsibilities of the Facility Coordinator to determine and prioritize the tasks and duties assigned to this position in an attempt to better establish a more efficient and effective manner in which the Facility Coordinator can manage his/her PREA duties.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have a written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment and to employ an agency PREA Coordinator.

115.12	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) Memorandum authored by the PREA Coordinator dated 03/20/2023 requiring contract monitoring to ensure the contractor is complying with PREA Standards.</li> <li>c) Eaton County Sheriff’s Office (ECISO) Contract with Contract Renewals</li> </ul> <p>Interviews:</p>

a) Agency's Contract Administrator

Observations made during the On-Site Audit and Document Review

115.12 Provision (a)

The Michigan Department of Corrections contracts with the Eaton County Sheriff's Office located in Charlotte, Michigan. MDOC has entered into a contract for the housing of up to 60 jail beds for male probation violators. This is so the violators can participate in the Westside Residential Alternative to Prison (WRAP) program. On page eleven of the contract, under Article 12, the contract states that; "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' policies. The Contractor and Contractor Personnel shall make themselves 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. The Contractor shall maintain and operate the facility in accordance with all federal, state, and local law; Court Orders, ACA Standards, State Regulations, and the Prison Rape Elimination Act (PREA) standards."

The evidence collected for this provision shows that the agency has entered into a contract for the confinement of prisoners and a written policy that require the contractor to adopt and comply with PREA standards. Therefore, through written policy, the facility has demonstrated that it does meet this provision.

115.12 Provision (b)

MDOC PREA Manual states in part that; "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 Agency provided a copy of the most recent Eaton County Sheriff's Office Final PREA Audit Report dated 06/30/22. In that report it appears that the Eaton County Sheriff's Office was compliant in 29 standards but non-compliant in 16 standards. This would suggest a failure to comply with the PREA Standards and related policies which could be considered a breach of contract.

The Agency's Contract Manager stated that the current contract term was effective from October 1, 2022, to September 30, 2023, and has utilized the first option year revised contract end date of September 30, 2024. There are three option years remaining on the contract. He also stated that he ensures that the contract is being fulfilled by ensuring that the Eaton Sheriff's Office is providing regular monthly reports to the MDOC Contract Monitor. The Agency's Contract Manager further indicated that the MDOC issued a corrective action plan to the ECSO on 10/11/2019

	<p>because a PREA audit had not been scheduled. The ECSO scheduled an independent PREA Audit on 11/08/2021- 11/10/2021. The MDOC received the interim report on 12/28/2021. The MDOC Contract Monitor has been in communication and is monitoring their PREA compliance. ECSO is currently scheduled to have another PREA audit completed by 08/19/2025. The interview conducted shows interaction by correspondence and corrective action plans between MDOC and ECSO. Showing that the agency is monitoring the progress of PREA compliance with the standards in accordance with the contractual agreement between the two agencies.</p> <p>The evidence collected for this provision shows that the agency has a written policy that require the contract be monitored for compliance with PREA standards. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard.</p>
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<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MRF 2024 Staffing Plan</li> <li>c) Warden memo dated 03/01/2024 (reasons for deviations)</li> <li>d) MDOC Policy Directive 04.04.100 (Custody Security and Safety Systems)</li> <li>e) MRF Operating Procedure 04.04.1001 (Rounds and Inspections)</li> <li>f) MRF Day, Evening &amp; Night Shift Duty Rosters</li> <li>g) Housing Units 1,2 3,4,5, and 7. Housing pods A through D, kitchen, medical, educational, and segregation Unannounced PREA Supervisor Administrative Unannounced Rounds reports</li> </ul> <p>Interviews:</p>

1. Interview with Warden
2. Interview with PREA Coordinator
3. Interview with Intermediate or higher-level Facility Staff

Observations made during the On-Site Audit and Document Review

115.13 Provision (a)

MDOC PREA Manual states that; "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.

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 MRF PREA Manager. In circumstances where the staffing plan is not complied with, the

facility shall document and justify all deviations from the plan.”

Since the last PREA audit, the average daily population of prisoners at the MRF was 1270 and the current staffing plan was predicated on 1270 prisoners housed at the facility.

During the interview with the Warden, he was asked if the facility had a staffing plan and if the staffing levels to protect prisoners from sexual abuse was considered in the plan? Also, if video monitoring is part of this plan and if the staffing plan is documented? The Warden confirmed, “Yes.” to all the above questions. The Warden also confirmed that when reviewing the staffing plan on an annual basis that they consider all the above matters. The Auditor also interviewed the PREA Manager and asked if the above considerations are weighed when developing the staffing plan. The PREA Manager explained that they were considered. The staffing plan is developed for 361 full-time security staff and 336 cameras. Finally, the facility provided a copy of the staffing plan review and acknowledgement form that indicates that both the PREA Manager and the Facility Warden reviewed and signed off on the MRF staffing plan.

During the on-site facility tour, the Auditor looked for potential blind spots, camera placement, and understaffing or overcrowding situations. The Auditor made no recommendations at the conclusion of the facility tour.

The evidence collected for this provision shows that the agency has a written policy that addresses appropriate staffing plans and reviews. Therefore, through written policy, personal observations, interviews conducted and corrective action, the facility has demonstrated that it meets this provision.

#### 115.13 Provision (b)

MDOC PREA Manual states that; “In circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan.”

During the interview with the Warden, he was asked if the facility documents all instances of non-compliance with the staffing plan. The Warden stated that, “Yes, it is documented and the explanation for not meeting the plan must be justified.” The Warden indicated that the it would be documented in the logbook located in central control. The facility reported no instances of not complying with the staffing plan during the audit period.

The MRF Warden listed the top four reasons for non-compliance with the staffing plan in a written memo dated 03/01/2024 as follows:

- Staff vacancies
- Family Medical Leave Act
- Staff Sick leave
- Increase in transportation escorts

The evidence collected for this provision shows that the agency has a written policy

that addresses documenting situations where staffing plans are not met. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.13 Provision (c)

MDOC PREA Manual states in part that; “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.

The MRF has provided the 2024 Staffing Plan memorandum documenting that since the last staffing study no relevant factors were found and therefore no need to adjust the 2024 staffing plan from the previous year.

During the PREA Manager interview, he was asked if he is consulted regarding any assessments or adjustments to the staffing plan. The PREA Manager stated that every facility must submit a new plan every year. The staffing plan is reviewed yearly and the PREA Manager must review and sign off on all staffing plan documentation using the agency CAJ 1027 Annual Staffing Plan Review Form. The facility did provide this form in the PAQ.

The evidence collected for this provision shows that the agency has a written policy that addresses performing annual staffing plan reviews. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.13 Provision (d)

MDOC PREA Manual indicates that, “Staff shall conduct and document rounds in accordance with Policy Directive 04.04.100 “Custody, Security, and Safety Systems.”

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 an announcement is related to the legitimate operational functions of the facility.”

MDOC Policy Directive 04.04.100 state in part that; “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 the following Paragraphs:

Wardens shall make rounds inside their institution at least monthly on each shift.

Deputy Wardens shall make at least weekly rounds inside their institution. This shall include making at least monthly rounds on each shift.

ADWs shall make at least weekly rounds in the areas of their responsibility as set forth in institutional operating procedures. This shall include making at least monthly rounds on each shift.

Shift Commanders shall make daily rounds inside their institution and at least weekly rounds in each housing unit and on each custody assignment, as set forth in institutional operating procedures.

Inspectors shall complete rounds as set forth in institutional operating procedures.

RUMs, Assistant Resident Unit Supervisors (ARUS), and Prison Counselors shall make daily rounds in the areas of their responsibility.

Other administrative staff identified by the Warden shall make rounds in the area of his/her responsibility as set forth in institutional operating procedures. This shall include rounds by the Facility Manager/Business Manager and the Physical Plant Supervisor.”

The MRF provided examples of Administrative Rounds for each housing unit, kitchen, infirmary, and dining hall spanning over the last year. These reports cover all three shifts day, evening, and night shift. The Administrative Rounds reports identify and document unannounced rounds by supervisors across all shifts at separate housing units during different times of the tour of duty. The report captures the date, time, officer, and location of the unannounced round.

During the interview process, the Auditor interviewed an intermediate or higher-level supervisory staff about unannounced rounds. The supervisor was asked if he conducted unannounced rounds and if he documented those rounds. The supervisor stated that, “Yes, he performs unannounced rounds and that they are documented in a logbook and by using the round reader.” When asked how the supervisor would prevent staff from alerting other staff members about unannounced rounds. The supervisor responded that he staggers his rounds and what buildings he enters from different directions at random times. He also stated that the alerting of others about supervisory rounds is against policy.

The evidence collected for this provision shows that the agency has a written policy that addresses performing unannounced rounds. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor

	has determined that the facility is fully compliant with this standard requiring the agency to have supervision and monitoring.
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115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC Policy Directive 05.01.140 (Prisoner Placement and Transfer)</li> <li>b) MDOC PREA Manual</li> <li>c) Facility Coordinator Memorandum referencing standard 115.14 provision (a) dated 04/02/2024</li> </ul> <p>Observations made during the On-site Audit and Document Review</p> <p>115.14 Provision (a)</p> <p>MDOC PREA Manual states in part that; “For MDOC prisons, male prisoners under the age of 18 who are sentenced as adults will be housed at the Thumb Correctional Facility (TCF) for access to age-appropriate housing and programming. Female prisoners under the age of 18 who are sentenced as adults will be housed at the Women’s Huron Valley Correctional Facility (WHV) for access to age-appropriate housing and programming. A youthful prisoner shall not be placed in a housing unit in which the youthful prisoner will have sight, sound, or physical contact with any adult prisoner (aged 18 or older) through use of a shared dayroom or other common space, shower area or sleeping quarters.”</p> <p>MDOC Policy Directive 05.01.140 further states that; “All prisoners who are under 18 years of age shall be housed in specialized areas at TCF or WHV. Prisoners requiring residential psychiatric or medical care who are approved for placement in an RTP, or who are approved for alternate placement by the CFA Deputy Director or designee, may be placed elsewhere. If housed at any location other than TCF or WHV, the youthful prisoner shall be housed with as much sight, sound, and physical contact separation from adult prisoners as possible in accordance with the Prison Rape Elimination Act (PREA) Manual.”</p> <p>The PREA Facility Coordinator provided this Auditor with a memorandum indicating there have been no instances in the last twelve months where the MRF has housed a juvenile prisoner and that it is against policy to house a juvenile at the MRF.</p>

	<p>115.14 Provision (b) &amp;(c)</p> <p>MDOC PREA Manual states in part that; “In areas outside of housing units, youthful prisoners shall either:</p> <ol style="list-style-type: none"> <li>(1) remain sight, sound and physically separated from adult prisoners, or</li> <li>(2) remain under direct staff supervision as defined in this manual.</li> </ol> <p>Youthful prisoners shall be given the same opportunity as other prisoners to participate in academic, vocational, therapeutic, and recreational programming. If housed at any location other than TCF for programming or other services, the youthful prisoners shall be housed with as much sight, sound, and physical contact separation from adult prisoners (18 and older) as possible to accommodate such programming or services. Youthful prisoners shall be assessed using the risk assessment process outlined in the PREA Risk Assessments section of this manual.”</p> <p>The MRF is not authorized to hold or house youthful prisoners, in accordance with the agency policy directive. The Facility Coordinator’s memo indicates that “Macomb Correctional Facility does not house prisoners under the age of 18.” Therefore, this standard is not applicable.</p> <p>During the on-site tour of the physical plant, the Auditor did not witness any youthful prisoners housed in the general or restricted housing units. After conducting 68 interviews with staff and prisoners, there was no evidence to suggest that the MRF houses youthful prisoners. Also, no interviews were conducted for this standard because there have been no incidences involving youthful prisoners. Therefore, this standard is not applicable, however, the agency does have policies and procedures in place to manage youthful prisoners when these situations occur.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard.</p>
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<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ol style="list-style-type: none"> <li>a) Michigan State Criminal Code</li> <li>b) MRF Operating Procedure 04.04.110 (Search and Arrest in Correctional Facilities)</li> </ol>

- c) MDOC PREA Manual
- d) MDOC Policy Directive 04.04.110 (Search and Arrest in Correctional Facilities)
- e) MDOC Policy Directive 04.06.184 (Gender Dysphoria)
- f) MRF Operating Procedure 03.03.140 (PREA)
- g) New Officer Training Personal Searches Curriculum
- h) MDOC CBT Sexual Abuse & Sexual Harassment Computer Based Training
- i) Memorandum by the MRF PREA Facility Coordinator dated 04/02/2024 regarding no instances of Cross-Gender Viewing & Searches
- j) MRF "Knock and Announce" Posters
- k) MRF Privacy Notice in English and Spanish
- l) MRF 2024 PREA Search Procedures Employee Training roster

Interviews:

1. Interviews with Random Staff
2. Interviews with Random Prisoners
3. Interview with Non-Medical Staff involved with strip searches

Observations made during the On-Site Audit and Document Review

115.15 Provision (a)

The MRF is situated on a 100-acre site that utilizes fifteen buildings totaling over 300,000 square feet. The complex is located in a rural area of New Haven, Michigan. The facility houses male prisoners only. MDOC PREA Manual states in part that; "Strip Searches in accordance with Policy Directive 04.04.110 'Search and Arrest in Correctional Facilities' cross-gender strip searches are prohibited except in exigent circumstances or when performed by medical staff. A strip search shall be performed only in the presence of employees of the same sex as the prisoner being searched except that in exigent circumstances, a supervisory employee of the opposite sex may be present when required by policy. Searches shall also be documented as directed by policy." The policy further states, "Body Cavity Searches in accordance with Policy Directive 04.04.110 'Search and Arrest in Correctional Facilities' 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. The facility shall document, in writing, all cross-gender strip

searches, cross-gender body cavity searches, and all cross-gender pat-down searches of female prisoners.”

The facility reported no instances or examples of exigent circumstances in the last 12 months because it is against policy and there are no female prisoners housed at this facility. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific searches. When interviewing the non-medical staff responsible for conducting strip searches, the officer was asked under what circumstance would it require a cross-gender strip search. The officer replied that she could not think of any circumstance that would constitute the need to cross gender strip-search a prisoner of the opposite gender unless in a life-threatening situation.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances when performed by medical practitioners. The interview with non-medical staff that conducts strip searches confirmed the practice during the interview. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (b)

MDOC PREA Manual states in part that; “Pat-down and Clothed Body Searches - properly conducted pat-down or clothed body searches require touching of a prisoner’s body and are necessary duties of custody staff. Conducting pat-downs and clothed body searches in accordance with policy and consistent with training is an important element to dispel allegations of sexual abuse and sexual harassment. All allegations of sexual abuse or sexual harassment from prisoners shall be reported through channels for investigation and entered into the appropriate MDOC computerized database. Department employees have authority to conduct a pat-down or clothed body search of a prisoner at any time. Following is a summary of the policy as it relates to the PREA standards:

- For facilities housing male prisoners/parolees pat-down and clothed body searches need not be conducted by a staff member of the same sex as the prisoner being searched.
- For facilities housing female prisoners/parolees pat-down and clothed body searches shall be conducted only by female staff 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.

As stated previously, the MRF does not house female prisoners. There are no examples of exigent circumstances over the last 12 months because it is against policy and no female prisoners are housed at the MRF. When conducting the on-site review of the facility, the Auditor observed adequate female staff to accommodate any day-to-day operations involving gender specific pat searches if necessary.

During the on-site phase, the Auditor interviewed 12 random staff members from day, evening, and night shifts. There was no need to ask questions concerning female prisoner searches and the possible lack of prisoner privileges associated with the need for female officers to search such prisoners, because the facility does not house female prisoners.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender pat searches except in exigent circumstances. The interviews conducted with staff confirmed that there have not been incidents where female prisoners have been limited to activities due to the shortage of female officers. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (c)

MDOC PREA Manual states in part that, "The facility shall document, in writing, all cross-gender strip searches, cross-gender body cavity searches, and all cross-gender pat-down searches of female prisoners."

The MRF PREA Facility Coordinator provided a memo dated 04/02/2024, that indicates there were no examples of these situations occurring during the audit rating period.

The evidence collected for this provision shows that the agency has a written policy that prohibits staff from conducting cross-gender strip searches and cross gender visual body cavity searches, except in exigent circumstances when performed by medical practitioners. Therefore, through written policy, the facility has demonstrated that it meets this provision.

#### 115.15 Provision (d)

MDOC PREA Manual states in part that; " Each Warden shall ensure the facility's physical plant layout enables prisoners to shower, perform bodily functions and change clothing without nonmedical staff of the opposite gender viewing the prisoners' breasts, buttocks, or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks. The Warden is not prohibited from reassigning staff of the opposite gender from positions or posts with visibility to the showers during shower times. Instances of cross-gender viewing in exigent circumstances shall be documented in a critical incident or memorandum to the Warden or Administrator. Such documentation shall be maintained for PREA audit purposes." The policy, along with MRF Operating Procedure 03.03.140, further states that; "For facilities housing male prisoners/offenders, female staff must announce their presence when entering a prisoner housing unit. Knock on the most interior door and announce in a loud clear voice, 'female(s) in the area,' wait 10 seconds and enter. If assigned for the entire shift, staff of the opposite gender must announce once upon entry to a unit. However, if staff leaves the unit, upon re-entry, they must once again knock and announce their presence."

When conducting the site review, the Auditor observed half wall partitions separating toilets from view, shower curtains or half doors for privacy when showering, and

monitoring screens with pixelated screens or cameras positioned away from these specific areas so staff could not view prisoners when using the restrooms or showers. The Auditor also witnessed officers announce their presence when entering a housing block of prisoners of the opposite sex.

During the on-site phase, the Auditor interviewed both random staff and prisoners. The 12 random staff were asked if they or other officers announce their presence when entering a housing unit of prisoners of the opposite sex. Of these staff members, 11 officers stated that they do, and one officer indicated not all the time just some of the time. When asked if prisoners can dress, shower, and use the restroom without being viewed by officers of the opposite sex, all 12 officers stated yes. The Auditor also interviewed 20 random prisoners and 21 targeted prisoners. When asked if female officers announce their presence when entering the housing block of the opposite sex: 21 prisoners stated yes, 3 prisoners rarely, and 16 stated no. When asked if they or other prisoners are ever naked in full view of female officers 36 prisoners stated, "No, they are not" and 4 stated, "Yes, they were."

Recommendation: The Auditor is recommending that the facility establish a procedure where cross-gender announcements and notifications are documented by the officers in their post logbook. This practice would absolutely codify this practice for future PREA audits.

The evidence collected for this provision shows that the agency has a written policy that enables prisoners to shower, perform bodily functions, and change clothes without being viewed by staff of the opposite sex. They also have a policy that requires all staff to announce their presence when entering a housing unit of prisoners of the opposite sex. The interviews conducted with random staff and prisoners confirmed that staff is practicing these policies. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.15 Provision (e)

MDOC PREA Manual and MDOC Policy Directive 04.06.184, both collectively state in part that; "Except as outlined in Policy Directive 04.06.184 'Gender Identity Disorder in Prisoners,' staff shall not search or physically examine a prisoner for the sole purpose of determining the prisoner's genital/sex status. If genital status is unknown, it may be determined during conversations with the prisoner, 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."

When interviewing random staff, they were asked if they were aware of the agency policy prohibiting staff from searching or physically examining a transgender person for the sole purpose of determining the prisoner's genital status. All random officers stated that, "Yes, they are aware and searching for the sole purpose of identifying gender is prohibited." The facility reported thirty-four transgender prisoners being housed at the MRF over the last twelve-month period. The Auditor was able to interview three transgender prisoners that confirmed that they had not experienced a situation where they were searched for the sole purpose of determining the prisoner's

	<p>genital status.</p> <p>115.15 Provision (f)</p> <p>The MRF does not conduct cross-gender pat searches unless exigent circumstances exist. The facility provided training records and training curricula as proof of receiving training on cross-gender pat searches and searches of transgender and intersex prisoners in a professional manner. During the on-site review, the Auditor interviewed 12 random staff and in those interviews the officers were asked if they had received training on how to conduct a cross-gender pat search and when did they received the training. All 12 officers stated that they had received training. From those interviews, 12 officers stated that they received the training during in-service training, the academy, and during their field training phase.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to have limits on cross-gender viewing and searches.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 03.03.140</li> <li>c) MDOC Identifying and Addressing Sexual Abuse and Harassment Guide for Prisoners in Braille</li> <li>d) MDOC Purchase Order with Global Interpreting Services LLC</li> <li>e) Sexual Violence Tri-Fold Pamphlet in both English &amp; Spanish</li> <li>f) Bi-Lingual Privacy Notices</li> <li>g) Prisoner Guidebook in both English &amp; Spanish</li> <li>h) PREA Informational Posters in both English &amp; Spanish</li> </ul>

- i) Just Detention Poster in both English & Spanish
- j) Bi-Lingual PREA Informed Consent Poster
- k) MRF PREA Coordinator memorandum dated 04/02/2024 regarding no instances during this rating period where the MRF housed any prisoners that required American Sign Language (ALS)

Interviews:

- a) Agency Head/Designee
- b) Random Staff
- c) Prisoners with Disabilities or limited English proficient

115.16 Provision (a)

MDOC PREA Manual states in part that; “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 agency has provided documentation of a contract between the MDOC and Global Interpreting Services (GIS) LLC, to provide interpreting and translation services that consists of Video remote, over the phone, and in-person interpreting services. The GIS also provides American Sign Language services and the 40 most common foreign languages from any desktop, tablet or handheld device using Zoom. The company also provides telephonic interpretation supporting a host of languages 24 hours a day, 7 days a week. During the site review, the Auditor observed the PREA posters, JDI posters, and both bi-lingual consent and privacy notices located in the housing units.

The Agency Head/Designee was interviewed and asked if his agency has established procedures to provide prisoners with disabilities and prisoners who are limited English can participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Designee stated that, “Yes, his agency has published information in Spanish, made accommodations for people with disabilities, (braille) and people with hearing disabilities. The Department provides for sign language interpreters and has contracts for language translation services.”

The Auditor interviewed seven prisoners that were disabled. Five prisoners were physically disabled, and two prisoners were cognitively disabled. All disabled prisoners were asked if the facility provided information about sexual abuse that they were able to understand, and if not, did the facility provide someone to help, write,

read, or explain? Also, did the prisoners understand the information that was provided? Five prisoners stated "Yes" to the question regarding PREA information that they could understand and two indicated that they did not. One prisoner identified as hard of hearing and the other prisoner could not read or write. The facility was asked to provide the PREA information to these two prisoners in a format that they could understand and acknowledge. The hard of hearing prisoner refused to participate and the illiterate prisoner received the PREA educational information in a manner that he could understand.

The evidence collected for this provision shows that the agency has a written policy that addresses that the facility takes appropriate steps to ensure that prisoners with disabilities and take appropriate steps to ensure that prisoners who are "limited English proficient" 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 or sexual harassment. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.16 Provision (b)

MDOC PREA Manual states in part that; "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 Agency has provided documentation of a contract between the MDOC and Global Interpreting Services (GIS) LLC, to provide interpreting and translation services that consists of Video remote, over the phone, and in-person interpreting services. The GIS also provides American Sign Language services and the 40 most common foreign languages from any desktop, tablet or handheld device using Zoom. The company also provides telephonic interpretation supporting a host of languages 24 hours a day, 7 days a week. During the site review, the Auditor observed the PREA posters, JDI posters, and both bilingual consent and privacy notices located in the housing units.

The Agency Head/Designee was interviewed and asked if his agency has established procedures to provide prisoners with disabilities and prisoners who are limited English can participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Designee stated that, "Yes, his agency has published information in Spanish, made accommodations for people with disabilities, (braille) and people with hearing disabilities. The Department provides for sign language interpreters and has contracts for language translation services."

Finally, the Auditor also interviewed one prisoner that was limited English proficient. The prisoner acknowledged that the facility had provided sexual abuse information in

a format that he was able to understand via a Spanish version of the educational video, Spanish PREA written material, the PREA informational posters, and the interpreter services.

The evidence collected for this provision shows that the agency has a written policy that addresses that the agency takes appropriate steps to ensure that prisoners who are “limited English proficient” 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 or sexual harassment. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.16 Provision (c)

MDOC PREA Manual states in part that; “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.”

During the audit interview process, the Auditor asked 12 random staff if the facility ever allows the use of prisoner interpreters. From that, 7 officers stated that they would not use prisoner interpreters and 5 officers stated that they would. When asked further about when and how, the 5 staff members indicated that they would use prisoner interpreters when they could not communicate with the prisoner due to the language barrier. Also, to the best of their knowledge, they had never witnessed an prisoner interpreter being utilized to assist in a sexual abuse allegation.

The evidence collected for this provision shows that the agency has a written policy that addresses that the facility shall not rely on prisoner interpreters. Therefore, through written policy, observations, and interviews conducted the facility has demonstrated that it meets this provision.

Recommendation The Auditor is recommending refresher training be provided to security staff regarding in what circumstances a prisoner interpreter can and should be used to assist in making an alleged sexual abuse report at the MRF, based on the random staff interviews conducted.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard referencing requirements for prisoners with disabilities and prisoners who are limited English proficient having equal opportunity or benefiting from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MDOC Policy Directive 02.06.111 (Employment Screening)
- b) MDOC PREA Manual
- c) Macomb Correctional Facility LEIN Venders List
- d) New Hire LEINS List
- e) MDOC PREA Background Questionnaire
- f) MRF 3-year background check on employee's report

Interviews:

- a) Interview with Human Resources Staff

Observations made during the On-Site Audit and Document Review

115.17 Provision (a)

MDOC Policy Directive 02.06.111 states in part that; "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."

MDOC PREA Manual further states that, "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 above.”

Incidents of sexual harassment shall be considered in determining whether to hire anyone to work for the MDOC. The Department shall ask all applicants who may have contact with prisoners directly about previous misconduct as described above in written applications and/or interviews for hiring.

The MRF has provided an excel spreadsheet indicating background checks performed through LEIN on contractors that may have contact with prisoners. The list contains 83 names with Race/Sex/D.O.B, the date the background check expires, and the company for which the employee works for.

The MDOC PREA Audit team explained that the process changed in 2020. Now all new hires are presented with the MDOC Background Questionnaire and must answer yes or no to the questions listed in MDOC Policy Directive 02.06.111. However, when they migrated to this new policy all the previous questions and answers from staff prior to 2020 were lost and could not be retrieved. Whereas no one hired before 2020, no longer has evidence of these questions being asked and answered. Therefore, the Auditor requested files from staff that had been hired and/or promoted within the last three years, given this is the time period this Auditor is reviewing. The facility provided evidence of both the MDOC PREA Background Questionnaire being asked during the hiring process and during promotional processes. The Auditor confirmed that this provision was in compliance with the standard during the facility’s last PREA audit.

#### 115.17 Provision (b)

MDOC Policy Directive 02.06.111 states in part that; “Incidents of sexual harassment shall be considered in determining whether to hire anyone, enlist the services of any contractor, or promote anyone who may have contact with an offender. The Department shall ask all applicants, including existing employees applying for positions within the Department, who may have direct contact with an offender in the position for which they are applying, about previous misconduct as described in this paragraph and in Paragraph G, either in written applications and/or during the interview process.” MDOC PREA Manual further states that, “Incidents of sexual harassment shall be considered in determining whether to hire anyone to work for the MDOC.”

During the audit interview process, the Human Resources staff member was asked if the agency considers prior incidents of sexual harassment when determining whether to hire or promote anyone and to enlist services of any contractors. The H.R. staff member stated that, “Yes, the facility does consider those prior incidents when reviewing employee evaluations and new hire applications.”

The Auditor requested files from staff that had been hired and/or promoted within the last three years given this is the time period this Auditor is reviewing. The facility provided evidence of the MDOC PREA Background Questionnaire being asked during the hiring process.

115.17 Provision (c)

MDOC Policy Directive 02.06.111 states in part that; "All offers of employment are contingent upon the applicant meeting all pre-employment screening requirements and background checks set forth in this policy. Whenever an applicant fails to meet any of these requirements, the offer of employment shall be rescinded." MDOC PREA Manual further states that, "In accordance with PREA standards and Policy Directive 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."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees, employees considered for promotion, and any contractor that may have contact with prisoners. The H.R. staff member stated that; "The records supervisor performs a criminal record check on all new hires, volunteers, and contractors every three to five years through the LEIN system." She further stated that all security staff are run every year through LEIN.

The facility did provide a copy of the New Hire LEIN's transaction record check log that identifies the individual being run, the date, and the reason for the record check including pre-employment background checks.

115.17 Provision (d)

MDOC PREA Manual states that, "In accordance with PREA standards and Policy Directive 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."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all newly hired sworn employees considered for promotion and any contractor that may have contact with prisoners. The H.R. staff member stated that; "The facility performs a criminal record check on all volunteers and contractors, prior to having access to the facility and every five years after that through the LEIN system."

The facility provided the Auditor with a contractor spreadsheet that identified the names of the contractors and volunteers along with the date the background check expires along with the contractors/volunteers' race/sex and date of birth.

The evidence collected for this provision shows that the agency has a policy requiring that criminal records be run on all new contractors that have contact with prisoners. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (e)

MDOC PREA Manual states in part that; "In accordance with PREA standards and Policy Directive 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."

During the audit interview process, the H.R. staff member was asked if the facility performs criminal record background checks for all sworn employees, and any contractor that may have contact with prisoners. The H.R. staff member stated that; "The records supervisor performs a criminal record check on all new hires, volunteers, contractors, and every five years through the LEIN system." She further stated that all security staff run through the LEIN every year. The facility provided a copy of their 3-year background check list with the officer's name, the date the history was made, by whom the report was made, and the reason the history was made. The facility also provided the Auditor with a contractor LEIN spreadsheet with the dates the records check was conducted on all contractors and volunteers.

The evidence collected for this provision shows that the agency has a policy requiring that criminal records check be run on all employees, contractors, and volunteers at least every five years. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it does meet this provision.

#### 115.17 Provision (f)

The MDOC PREA Background Questionnaire application for Corrections lists the three PREA related questions that must be asked of the applicant. Question 1 states, "Have you engaged in sexual abuse in an institutional setting?" Question 2 states; "Have you 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?" And finally, question 3 states; "Have you been civilly or administratively adjudicated for having engaged in sexual activity described in questions 1 and 2?" The MDOC imposes an affirmative duty on each of its employees to disclose any sexual misconduct prior to employment as well as during their employment.

During the interview with the H.R. staff member, it was asked if the facility asks all applicants and employees about previous misconduct regarding prisoners and does the facility impose upon employees a continuing affirmative duty to disclose previous misconduct. The H.R. staff member stated that the agency has a list of questions that must be answered in the application for new hire. She also stated that, "Yes, all

employees must report any misconduct or interaction with law enforcement.” The agency provided copies of the PREA Background Questionnaire applications subsequent to 2020.

The evidence collected for this provision shows that the agency has a policy requiring that they ask about previous misconduct and the employee’s responsibility to disclose such misconduct. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.17 Provision (g)

MDOC Policy Directive 02.06.111 states in part that; “Falsification or omissions of any information given by an applicant for employment during employment screening may result in removal from employment consideration and, if discovered after hire, may result in termination of employment.” MDOC PREA Manual further states that, “Omissions regarding the reporting of such misconduct, or the provision of false information, are grounds for discharge in accordance with the Employee Handbook.

The evidence collected for this provision shows that the agency has a policy requiring that material omissions regarding such misconduct or the provision of materially false information are grounds for termination. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.17 Provision (h)

It appears that the MDOC does not currently have a policy that directly addresses this provision. However, the H.R. staff member was asked during the interview, “If a former employee applies for work at another institution and a request by that institution is made, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving that former employee?” The H.R. staff member stated that she would require a signed release of information from the requesting agency prior to releasing that information.

The evidence collected for this provision shows that the facility has a practice in place requiring that, unless prohibited by law, the agency shall provide information on substantiated allegations of sexual abuse and sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the employee has applied to work. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

**Recommendation** The Auditor is recommending that the agency develop a policy to directly address when the facilities are permitted to provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon request from an institutional employer for whom such employee has applied to work.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is not fully compliant with this standard requiring hiring

	<p>and promotional decisions.</p> <p>Corrective Action for (e): The facility must show proof that five-year reoccurring background checks for security staff is being conducted.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MRF PREA Coordinator Memorandum dated 04/02/2024 documenting no substantial renovations or monitoring technology upgrades during this audit period.</li> <li>b) MDOC PREA Manual</li> <li>c) MDOC Project Review and Approval Form</li> <li>d) MRF Camera List</li> </ul> <p>Interviews</p> <ul style="list-style-type: none"> <li>a) Interview with Agency Head/Designee</li> <li>b) Interview with Warden</li> </ul> <p>Observations made during the On-Site Audit and Document Review</p> <p>115.18 Provision (a)</p> <p>MDOC PREA Manual states in part that; “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.”</p> <p>The facility has not acquired or made a substantial expansion or modifications to the existing facility since the last PREA audit in 2021.</p> <p>The agency has provided a memo authored by the MRF PREA Coordinator stating that there has been no new expansions or modifications to his facility since the last PREA Audit. In addition, the facility provided a blank copy of a MDOC Project Review and Approval form that requires the individual filling out the form to acknowledge PREA considerations.</p> <p>During the audit interview phase, the Agency Head/Designee was asked that when</p>

planning substantial modifications to a facility, “How does the agency consider such changes on its ability to protect prisoners from sexual abuse?” The Designee stated, “When designing facilities, they include individuals from various departments and disciplines in the process to include people responsible for PREA and ADA.” In addition, the Warden was also asked the same question. The Warden indicated that he believes every project now must consider PREA related issues.

The evidence collected for this provision shows that the agency shall consider the effect of such design to improve the ability to protect prisoners from sexual abuse. Therefore, through personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### Provision (b)

MDOC PREA Manual states in part that: “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.”

The agency has provided a memo authored by the MRF PREA Coordinator stating that there has been no new installation or updates to any video monitoring systems, electronic surveillance systems, or other monitoring technology at its facility since the last PREA Audit.

During the audit interview phase, the Agency Head/Designee was asked how the agency uses monitoring technology. The Designee stated that; “The department utilizes cameras extensively throughout their facilities to help with detection of illegal activities to include sexual abuse.” The Warden was also asked a similar question about how the facility had considered using technology to enhance prisoners’ protection from sexual abuse. The Warden indicated that the facility tries to identify blind spots and review all monitoring equipment to make sure all cameras are in working order to be as effective as possible.

During the on-site review tour, the Auditor observed security cameras and monitors located throughout the facility.

The evidence collected for this provision shows that the agency has considered how technology may enhance the facility’s ability to protect prisoners from sexual abuse. Therefore, through written memorandums, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined that the agency is fully compliant with this standard addressing upgrade to facilities and technology.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents

- a) MDOC PREA Manual
- b) MDOC Crime Scene Management and Preservation Training
- c) Michigan State Police Letter regarding Criminal Investigations
- d) MDOC Interview and Investigation, Techniques and Fundamentals Training
- e) SANE / SAFE Memorandum
- f) MDOC PREA Forensic Examination Completed at Outside Hospital form
- g) MDOC Policy Directive 03.04.100 (Health Services)
- h) MDOC Policy Directive 03.03.140 (Sexual Abuse & Harassment of Prisoners)

Interviews

- 1. Interview with SANE/SAFE staff
- 2. Interview with prisoners who reported a sexual abuse
- 3. Interview with the PREA Compliance Manager
- 4. Interviews with random staff

Observations during on-site Facility tour.

115.21 Provision (a)

MDOC PREA Manual states in part that; "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 entries. The facility shall coordinate the actions of the investigators, first responders, law enforcement and forensic examiners to ensure that available direct and circumstantial evidence is gathered and preserved, including any physical DNA evidence and available electronic monitoring data."

The facility provided a letter written by the Michigan Department of State Police

Deputy Director stipulating that the Michigan State Police (MSP) is responsible for all criminal investigations that occur on the grounds owned and operated by the MDOC. The PREA Manager was also asked this question. The PREA Manager explained that the MSP conducts all criminal sexual assault investigations at the MDOC facilities. The Auditor contacted the MSP Metro North Post and spoke to a supervisor to establish if they did in fact conduct alleged sexual assault criminal investigations at the MRF. Arrangements were made by the Auditor to contact the Trooper via phone call. The Trooper informed the Auditor that they do in fact investigate all criminal sexual assault allegations and acknowledged that the only requirement needed to send an investigator is an official request from the Facility Inspector. The MSP is responsible for investigating allegations of sexual crimes that occur within the MDOC facilities and is familiar with PREA standard 115.21 pertaining to the investigation of sexual assaults, the collection of evidence, and forensic examinations. Furthermore, the MRF provided the MDOC Crime Scene Management and Preservation Training that all Facility Investigators must complete. The Trooper informed the Auditor that it is the facility's responsibility to collect and preserve all physical and circumstantial evidence until the MSP can stop by and collect the evidence, excluding the evidence collected in a forensic medical examination.

When the Auditor interviewed random staff, it was determined that 11 of the 12 staff were aware of their responsibilities to preserve evidence during a sexual abuse allegation. They discussed securing the scene, notifying a supervisor immediately, contacting medical personnel, placing clothing in a brown paper bag, writing a detailed report, and not allowing the victim or accuser to bathe or brush their teeth. Also, when asked who was responsible for investigating criminal and administrative cases, staff members identified the MRF PREA Coordinator (Inspector) 6 times, the Facility Investigator 4 times, the shift commander 1 time, and one officer indicated Internal Affairs. All random staff interviewed were therefore aware of the protocol for evidence collection. The majority of security staff were also aware of who, and under what circumstances, the facility investigator or inspector would conduct sexual abuse allegations. The facility investigator does conduct an initial inquiry to determine what the allegation is and if it appears to be a legitimate allegation. If the allegation is indeed a sexual abuse allegation then that information is forwarded to the Michigan State Police for investigation. If it is determined that the allegation is sexual harassment then the facility investigator is assigned the case.

The evidence reviewed for this provision shows that the agency has demonstrated that they do follow a uniform evidence protocol for obtaining physical evidence for administrative and criminal proceedings. Therefore, through written policy, and interviews conducted, the agency has demonstrated that it meets this provision.

#### 115.21 Provision (b)

The facility did not house youthful prisoners in their facility over the last twelve months. The MRF provided MDOC Crime Scene Management and Preservation classes to all facility investigators. The established protocol is developmentally appropriate for youth and is based on or similar to other comprehensive and authoritative protocols developed after 2011.

The MRF utilizes the Michigan State Police to conduct all criminal investigations within the facility. The MSP are certified law enforcement officers through the State of Michigan. In addition, the policy listed above would suggest that all necessary protocols would be adapted and followed on the most recent edition of the Department of Justice (DOJ's) Office on Violence Against Women publication in accordance with this standard.

The evidence reviewed for this provision shows that the facility has demonstrated that they do follow a protocol that is developmentally appropriate for youth. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (c)

MDOC PREA Manual states in part that; "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. The examination shall be without financial cost to the prisoner and performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE), where possible. If a SAFE or SANE cannot be made available, the examination can be performed by another qualified medical practitioner(s). The Department shall document its efforts to provide the examination by a SAFE or SANE. A copy of the completed PREA Forensic Examination Completed at Outside Hospital Form (CAJ-1020) and any notes evidencing the Department's efforts shall be maintained with the investigation packet. When the incident is alleged to have occurred more than 96 hours previously, a forensic examination is not required. However, the prisoner shall be referred to health care and mental health services in accordance with Department Operating Procedure 03.04.100H 'Health Care Management of Reported Sexual Assaults of Prisoners in CFA Facilities.'"

MDOC Policy Directive 03.04.100 states in part that; "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."

Any allegations of sexual abuse that appears criminal will be referred to the MSP for criminal investigation. The alleged victim shall be immediately transported to either the Henry Ford Macomb Hospital located in Clinton, Michigan or the McLaren Macomb Hospital in Mount Clemons, Michigan to be examined by a medical professional who is skilled and experienced in the use of rape kits for the collection of forensic evidence. MRF has entered into an agreement with Turning Point Rape Crisis Center who employs Sexual Assault Nurse Examiners (SANE) or a Sexual Assault Forensic Examiners (SAFE), who are on call and available 24 hours a day 7 days a week. This policy also specifically states that treatment services shall be provided to the alleged victim without financial costs to the victim.

The facility provided a memo from the MRF PREA Coordinator that spells out the

necessary contact numbers and locations for Turning Point when it is necessary for the facility to contact a SANE nurse when a medical forensic examination is necessary.

During the post-audit phase, an interview was conducted by the Auditor with the supervisor of the Turning Point Rape Crisis Center. The interview was conducted by phone regarding forensic medical examinations. Turning Point employs SANE Nurses in Michigan. A SANE nurse is a highly skilled certified nurse trained in the art of evidence collection and chain of custody. The nurse is considered the subject matter expert in collecting evidence after an alleged sexual assault has occurred. The nurse is also required to provide testimony in court cases related to sexual abuse. The supervisor explained that she is aware of an agreement between the MRF and Turning Point when it comes to conducting SANE exams. She explained that Turning Point conducts SANE exams for the surrounding jurisdictions. When asked if Turning Point is responsible for conducting all forensic medical exams for prisoner victims of sexual abuse for Macomb Correctional Facility, the Supervisor stated, "Yes, they are the entity that offers forensic medical examinations and would provide those services for the surrounding correctional facilities if requested by law enforcement." When asked if SANE staff is unavailable to conduct forensic medical examinations then who assumes the responsibility? The supervisor replied, "That her Center is available and that nurses are always on call 24 hours a day, 7 days a week, 365 days a year." The Supervisor explained that if the SANE was conducting another examination then the prisoner may have to wait a couple of hours before being seen.

The Auditor asked the Turning Point Supervisor if she was aware of any SANE examinations performed on Macomb prisoners in the last twelve months. She stated not off hand but could provide that information to me. Turning Point indicated that they had performed thirty forensic examinations for Macomb Correctional Facility over the last twelve months.

The evidence collected for this provision shows that the agency has procedures in place to offer all victims of sexual abuse access to forensic medical examinations at an outside facility, without financial cost to the victim. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.21 Provision (d)

MDOC PREA Manual states in part that; "The Department shall attempt to make available a victim advocate from a rape crisis centers, which are not part of the criminal justice system, which 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 victim advocates.

As requested by the victim, the victim advocate, qualified community-based organization staff member or qualified staff shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. MDOC investigations shall not be impeded or delayed while the prisoner waits for an advocate.

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

The facility has provided an agreement between The MDOC and Turning Point Rape Crisis Center. Turning Point is a victim services advocate that provides confidential support and assistance to sexual assault victims for the entire prisoner population incarcerated at Macomb Correctional Facility. In accordance with 42. USC 14043g (b) (2) (c) the requirements to be considered a “rape crisis center” are as follows:

1. Provide a 24-hour hotline
2. Accompaniment and advocacy through the medical, criminal justice, and social support systems.
3. Short-term crisis intervention support.
4. Information and referral to assist sexual assault victim and family
5. Community out-reach for underserved communities
6. The development and distribution of materials on issues related to the above-listed issues.

The Auditor has reviewed the Turning Point website to determine that this advocacy group does meet all the criteria listed above to be considered a “rape crisis center.”

During the interview with the Turning Point supervisor, she indicated her agency will maintain a trained pool of advocates to respond to sexual assault and maintain confidentiality as required by state standards for certified crisis counselors. She also stated that when a SANE Nurse is called out a certified advocate will always accompany the SANE Nurse.

The MRF PREA Coordinator was interviewed by the Auditor and stated that staff would allow access to a victim advocate if the prisoner requested. The MRF PREA Coordinator also stated that the facility provides access to Turning Point through the prisoner phone system. During the on-site facility tour, the Auditor initiated a call to Turning Point through the prisoner phone system while touring a housing unit to determine the effectiveness and efficiency of the organization. Finally, the Auditor

interviewed four prisoners that had recently reported sexual abuse. When asked if the facility allowed them to contact anyone after reporting the sexual abuse, all four prisoners indicated that they were not offered any services.

During the on-site review, the Auditor spoke to several prisoners who confirmed the availability to contact Turning Point via phone and test called the requesting advocacy number. This demonstrates the agency's attempt to make available to victims of sexual abuse a victim advocate from a rape crisis center.

The evidence collected for this provision shows that the agency has demonstrated that they do offer services from a victim advocate from a rape center that is not associated with the criminal justice system or law enforcement and provides confidentiality. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (e)

MDOC PREA Manual states in part that; "As requested by the victim, the victim advocate, qualified community-based organization staff member or qualified staff shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals."

The Auditor interviewed the Supervisor of Turning Point Rape Crisis Center and asked, if requested by the victim, would the victim advocate accompany and support the victim through the forensic medical examination process and investigatory interviews. The supervisor indicated that when a SANE Nurse is called out for a forensic medical examination, a certified advocate will always accompany the SANE Nurse.

When the Auditor reviewed the case file that required a SANE examination, the facility documented that an advocate was made available to the prisoner at the time of the examination through Turning Point. Lastly, when asked how the agency ensures that the advocate meets the qualifications described above, the MRF PREA Coordinator stated that the service is coming from an official rape crisis center and the counselors must be licensed. When conducting interviews with three prisoners that reported sexual abuse, none of these prisoners required a medical forensic examination given the nature of their allegations.

The evidence collected for this provision shows that the agency has demonstrated that they do allow victim advocates to accompany and support alleged victims of sexual assault during the forensic examination and during the investigatory interview. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.21 Provision (f)

The facility provided a memorandum written by the Michigan State Police Deputy Director which states in part that; "The Department of Michigan State Police (MSP) is

a state agency responsible for investigating criminal allegations of sexual abuse in Michigan Department of Corrections (MDOC) prisons. As a state agency responsible for investigating criminal allegations of sexual abuse in MDOC prisons, the MSP is required to comply with paragraphs (a) through (f) of section 115.21 of the Prison Rape Elimination Act (PREA) Standards for Prisons and Jails. The MSP is in compliance with paragraphs (a) through (c) of section 115.21 which address evidence protocol and forensic medical examinations. Paragraph (d) of section 115.21 requires attempting to make available to the victim a victim advocate from a rape crisis center, a qualified staff member from a community-based organization, or a qualified agency staff member. The MDOC agrees to comply with (d) of section 115.21 by attempting to make available to the victim a victim advocate from a rape crisis center, a qualified staff member from a community-based organization, or a qualified agency staff member. The MDOC also agrees to document efforts to secure services from rape crisis centers in accordance with paragraph (d) of section 115.21. The MSP will comply with paragraph (e) by allowing the victim advocate, qualified agency staff member, or qualified community-based organization staff member to accompany and support the victim through the forensic medical examination process and investigatory interviews.”

The evidence collected for this provision shows that the facility has demonstrated that the Michigan State Police Department follow the provisions outlined in this provision. Therefore, through written policy, and verbal agreement, the agency has demonstrated that it meets this provision. The evidence collected for this provision shows that the agency/facility conducts their own administrative and criminal sexual abuse investigation and therefore, this provision is not applicable to this facility.

**Conclusion**

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to provide evidence protocols and forensic medical evaluations.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:  Documents:  a) MDOC Policy Directive 03.03.140  b) MDOC Policy Directive 01.01.140 (Internal Affairs)

- c) MDOC PREA Manual
- d) MDOC Web page (Internal Affairs Policy)
- e) Michigan State Police memorandum regarding Criminal Investigations
- f) MRF Sexual Abuse and Sexual Harassment investigative case files

Interviews:

1. Interview with Agency Head/Designee
2. Interview with Investigative Staff

Observations made during the On-site Phase of the Audit.

115.22 Provision (a)

MDOC Policy Directive 03.03.140 states in part that; "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." MDOC PREA Manual further states that, "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."

In the past twelve months, the MRF reported that they had received 118 allegations of sexual abuse or sexual harassment. The facility has reported that 118 allegations resulted in administrative investigations and 67 cases were turned over to the MSP unit for criminal investigation. While on-site, the Auditor reviewed 20 administrative investigations.

When interviewing the Agency Head/Designee he stated that, "Yes, the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and harassment." The Designee explained that sexual abuse allegations are initially investigated by facility investigators who can then refer to the MSP if there is evidence that a crime may have been committed.

During the document review, the Auditor reviewed 20 case files that consisted of 6 allegations of sexual harassment and 14 allegations of sexual abuse. All cases were investigated by the Facility Investigator and/or MSP, respectively.

The evidence collected for this provision shows that the agency has procedures in place to ensure that an administrative or criminal investigation is completed on all allegations of sexual abuse and sexual harassment. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

115.22 Provision (b)

MDOC Policy Directive 03.03.140 states in part that; "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." In addition, the Michigan State Police letter states in part that, "The Department of Michigan State Police (MSP) is a state agency responsible for investigating criminal allegations of sexual abuse in Michigan Department of Corrections (MDOC) prisons. As a state agency responsible for investigating criminal allegations of sexual abuse in MDOC prisons, the MSP is required to comply with paragraphs (a) through (f) of section 115.21 of the Prison Rape Elimination Act (PREA) Standards for Prisons and Jails." Finally, the agency PREA Policy Directive 03.03.140 can be found in its entirety on the agency /facility website.

During the post-audit phase, the Auditor interviewed a Michigan State Trooper supervisor required to assign sexual abuse investigations to Troopers that occurred in the MRF. The Trooper was asked if agency policy requires that allegations of sexual abuse be referred for investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potential criminal activity. The investigator stated, "Yes, her agency has agreed to conduct all criminal investigations that occur in the MRF." In addition, while on-site the Auditor conducted an interview with the facility investigator. When this same question was posed to the facility investigator, he indicated that he would conduct an initial inquiry and if he believed probable cause existed that a crime had been committed then he would contact MSP. The facility investigator also stated that MSP has the legal authority to conduct criminal investigations.

The evidence collected for this provision shows that the agency has procedures 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. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### Provision (c)

MDOC Policy Directive 03.03.140 states in part that, "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 policy further states that, "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 Policy Directive 02.03.100 'Employee Discipline' or Policy Directive 01.01.140 '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." As stated above, this policy can be found in its entirety on the agency and facility website.

#### Provision (d)

The MRF has provided a letter written by the Deputy Director of the Michigan State Police dated 09/30/2015 stating in part that; “The Department of Michigan State Police (MSP) is a state agency responsible for investigating criminal allegations of sexual abuse in Michigan Department of Corrections (MDOC) prisons. As a state agency responsible for investigating criminal allegations of sexual abuse in MDOC prisons, the MSP is required to comply with paragraphs (a) through (f) of section 115.21 of the Prison Rape Elimination Act (PREA) Standards for Prisons and Jails. The MSP is in compliance with paragraphs (a) through (c) of section 115.21 which address evidence protocol and forensic medical examinations. Paragraph (d) of section 115.21 requires attempting to make available to the victim a victim advocate from a rape crisis center, a qualified staff member from a community-based organization, or a qualified agency staff member. The MDOC agrees to comply with (d) of section 115.21 by attempting to make available to the victim a victim advocate from a rape crisis center, a qualified staff member from a community-based organization, or a qualified agency staff member. The MDOC also agrees to document efforts to secure services from rape crisis centers in accordance with paragraph (d) of section 115.21. The MSP will comply with paragraph (e) by allowing the victim advocate, qualified agency staff member, or qualified community-based organization staff member to accompany and support the victim through the forensic medical examination process and investigatory interviews.”

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency to ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

115.31	Employee training
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) 2021-2022 PREA Course Mandatory all employees (Modules 1-10)</li> <li>b) 2022 MDOC Training Plan</li> <li>c) New Employee PREA Training (Academy)</li> <li>d) MDOC PREA Manual</li> <li>e) 2021-2022 PREA Course Mandatory all employees Course Quiz</li> </ul>

f) MRF 2023 PREA Training Completion Report

Interviews:

1. Interview with Random Staff

Observations made during the On-Site Audit and Document Review

115.31 Provision (a)

The MRF provides PREA refresher training to all their employees every two years. New hires are trained while in basic training and then during refresher training. The MRF has provided the PREA mandatory training course for all employees' curriculum modules 1-10. This training was developed by the Moss Group and made available through the PREA Resource Center. They have provided a PREA In-Service Training Completion Report along with agency policy MDOC PREA Manual, which states in part that; "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:

- (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.

During the interview process, 12 random staff were asked if they had received PREA training, and if so, when? All 12 officers indicated that they have received PREA training. Annual in-service training or Computer Based Training (CBT) was mentioned 9 times and when they attended the Academy was mentioned 4 times. When the Auditor reviewed staff files, it contained the dates of the initial training and

proceeding PREA refresher training.

The evidence collected for this provision shows that the agency has procedures in place to train all employees on all relevant topics outlined in this standard provision. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.31 Provision (b)

MDOC PREA Manual in part that; “Training shall address gender-specific issues of prisoners housed with the MDOC. The employee shall receive additional training if the employee is reassigned from a facility that houses only male prisoners to a facility housing only female prisoners, or vice versa.”

The facility also provided the agency’s additional PREA training curriculum for their primary female prisoner facility. This training module is called “Collaborative Case Management for Women” as evidence that if employees who are reassigned from facilities housing the opposite gender are given additional training. However, only male prisoners are housed at the MRF.

The evidence collected for this provision shows that the facility has trained their employees to the gender of the prisoner at the employee’s facility. Therefore, through written policy, interviews conducted and document review, the facility has demonstrated that it meets this provision.

#### 115.31 Provision (c)

MDOC PREA Manual states in part that; “The Department shall provide each employee with refresher training every two years to ensure that all employees know the Department’s policies and procedures. In years in which an employee does not receive refresher training, the Department will provide refresher information on current sexual abuse and sexual harassment policies.”

The MRF provides PREA refresher training every two years. All new employees receive initial PREA training when attending the Academy. In addition, the MDOC establishes a yearly training plan for all employees. This training is accomplished through their CBT platform. The facility provided agency training plans for 2020, 2021, and 2022. Each plan has designated a two-hour block dedicated to PREA training. This practice was confirmed by sampling 12 employee training records. The files indicated that all 12 employees received initial PREA training, and 8 officers had received refresher training. The 4 staff files that were missing the refresher training documentation had hire dates of the Fall of 2023. The Auditor has determined that these files were accurate given the newly hired status and that the officers had not been employed for an entire year. Finally, the MRF provided several PREA training attendance rosters and basic training records documenting the completion of the agency’s annual PREA refresher training.

The evidence collected for this provision shows that the agency has provided initial and refresher PREA training to all their employees at least once a year. Therefore,

	<p>through written policy and file review observations, the facility has demonstrated that it meets this provision.</p> <p>115.31 Provision (d)</p> <p>MDOC PREA Manual states in part that; “The Department shall document through an employee signature or electronic verification that employees receive and understood the training.”</p> <p>The MRF maintains training documentation with signatures generated from a Jail Management System platform that makes the student/officer electronically acknowledge the training that was received and that requires the employee to sign acknowledging that they understand the training that was provided. The facility has provided training acknowledgement reports for 2022 and 2023.</p> <p>The evidence collected for this provision shows that the facility has provided documentation through employee signature, acknowledging that the employee understands the training received. Therefore, through written policy and file review observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the agency train all employees who have contact with prisoners on its zero-tolerance policy for sexual abuse and/or harassment. Also, how to fulfill their responsibilities for preventing, detecting, reporting, and responding to sexual abuse. The prisoners and employees’ rights to be free from retaliation, prisoners right to be free from sexual abuse, the dynamics of sexual abuse in confinement, common reactions of sexual abuse victims, how to communicate effectively with prisoners, including LGBTQ prisoners, and how to comply with relevant laws related to mandatory reporting of sexual abuse.</p>
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<b>115.32</b>	<p><b>Volunteer and contractor training</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC Policy Directive 03.02.105 (Volunteer Services and Programs)</li> <li>b) MDOC Policy Directive 03.03.140</li> </ul>
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- c) MDOC PREA Manual
- d) Program A Correctional Facilities Administration (CFA) Security Regulations
- e) CFA PREA Training Acknowledgement Form
- f) MRF PREA Volunteer Acknowledgement Forms

Interview:

1. Interview with Volunteer
2. Interview with Contractor

#### 115.32 Provision (a)

MDOC Policy Directive 03.03.140 states in part that; “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, ‘Contractor/Volunteer.’” MDOC Policy Directive 03.02.105 further states that, “Volunteers and contractors, who have contact with prisoners, 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.” Lastly, MDOC PREA Manual states in part that, “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 the 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. The facility shall maintain documentation confirming that volunteers receive and understand such training. The Department shall maintain documentation confirming that contractors receive and understand such training.”

Volunteers and Contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a Contractor/Volunteer PREA Acknowledgement form. The facility maintains all copies of signed volunteer and contractor acknowledgement forms and the facility provided examples of those forms as evidence of their compliance.

During the interviews with both a volunteer and contractor, the Auditor asked them if they had been trained in their responsibilities regarding sexual abuse and sexual harassment prevention, detection, and response. Both individuals that were interviewed answered in the affirmative.

While performing the document review and the PAQ review the Auditor observed several signed volunteer/contractor PREA Acknowledgement forms.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors that have contact with prisoners are trained on the prevention, detection, and response policies regarding sexual abuse and sexual harassment. Therefore, through written policy, personal observations, and interviews conducted, the agency has demonstrated that it meets this provision.

#### 115.32 Provision (b)

MDOC PREA Manual states in part that; “The level and type of training provided to volunteers and contractors shall be based on the services they provide and the 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.”

The facility currently reports that they have 101 contractors and volunteers that may have contact with prisoners. The facility is reporting 100% participation in training. Volunteers and contractors are trained during their initial orientation and are required to acknowledge that they have received the necessary PREA training by signing a Volunteer/Contractor PREA Acknowledgement form. The facility maintains all copies of signed Volunteer and Contractor Acknowledgement forms.

When interviewing the volunteer, he stated that training consists of the PREA zero-tolerance policy and how to report if you are told. Also, if he was confronted with an allegation, how he would notify custody staff. When one contractor was asked the same question her response was that she received the PREA training when she first got hired. She explained that the training consisted of the definition of sexual abuse and harassment; separating the victim and asking the victim not to eat, drink, shower, and use the bathroom. The contractor also indicated that if someone made an allegation of sexual abuse to her that she would notify the security staff. The PREA training curriculum provided in the PAQ contains information regarding the agency’s zero-tolerance towards all sexual abuse and the PREA volunteer and contractor acknowledgement form confirms receipt of that information.

The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors are notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.32 Provision (c)

MDOC Policy Directive 03.02.105 states that, “Volunteers and contractors, who have contact with prisoners, 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 Manual states in part that, “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

	<p>and procedures. The facility shall maintain documentation confirming that volunteers receive and understand such training.</p> <p>The volunteer and contractor acknowledgement forms are maintained by the MRF PREA Coordinator. In addition, the facility provided fifteen examples of signed PREA acknowledgment forms in the PAQ.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure all volunteers or contractors documentation confirming that they received PREA training and understood that training. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring PREA training for both volunteers and contractors.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC Policy Directive 03.03.140</li> <li>b) MDOC PREA Manual</li> <li>c) CAJ-1036 Prisoner PREA Education Verification</li> <li>d) MDOC Policy Directive 04.01.105 (Reception Facility Services)</li> <li>e) MDOC Policy Directive 04.01.140 (Prisoner Orientation)</li> <li>f) CAJ-1036 (a) Prisoner PREA Information Verification 72 hours</li> <li>g) PREA Handbook in Braille</li> <li>h) Prisoner Guidebook in Spanish</li> <li>i) An inside line in Spanish and English</li> <li>j) PREA Tri-Fold in Spanish</li> <li>k) Sexual Abuse posters in English and Spanish</li> </ul>

I) MDOC Purchase Order with Global Interpreting Services LLC

Interview:

1. Interview with Intake Staff
2. Interview with Random Prisoners

115.33 Provision (a)

All MDOC prisoners arriving at the state correctional system are initially sent to an Intake Facility. Here the prisoners are classified, medically evaluated, and provided with all the necessary education and information needed during their stay. It is at these Intake Facilities that the MDOC prisoners initially receive the PREA information along with the more comprehensive PREA education. At the MRF, they receive prisoners from other Michigan State Penitentiaries. Therefore, all prisoners will receive their initial PREA education and information at the MDOC Intake Facilities.

MDOC PREA Manual states in part that; "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."

MDOC Policy Directive 03.03.140 states in part that; "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."

The MRF identified that there were 1098 prisoners admitted into their facility in the last twelve months. Of those 1098 prisoners, all received the initial PREA information during the intake process along with comprehensive PREA educational information at the intake facility. Once the prisoner is brought to MRF they are informed of the MRF PREA Coordinator's name and the victim advocates for that facility by the Prison Counselor.

During the interview with the Intake Officer, she explained that part of her responsibility as a prison counselor is to provide all arriving prisoners with the zero-tolerance policy and how to report sexual abuse. She stated the prisoners sign the PREA Acknowledgement forms after they have watched the PREA video and given the

orientation book. She also goes over the PREA hotline and third-party reporting. Finally, the counselor indicated that there are posters mounted on the walls throughout the facility that explain these same instructions. During interviews, 20 random prisoners and 21 targeted prisoners were asked if they had received information about the facility's rules against sexual abuse and harassment. Of those questioned, 29 prisoners affirmed and acknowledged that they had received PREA educational information, 9 indicated they had not, and 3 did not recall.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners receive information explaining how to report sexual abuse and the agency's policy on zero-tolerance for sexual abuse or harassment at the time of intake. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (b)

MDOC Policy Directive 03.03.140 states in part that; "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."

The MRF identified 1098 prisoners whose length of stay in the facility was over 30 days or more in the last twelve months. Of those 1098 prisoners, the facility reports that all had received comprehensive PREA education regarding sexual abuse or harassment.

The Auditor interviewed an Intake Officer who stated that PREA information is posted in all of the housing units. She also stated that the prisoners are provided this information within the first 72 hours of arriving at the facility. The Intake Officer also indicated that all prisoners sign a 1036 form acknowledging they watched the PREA video in its entirety which is shown in the recreational room. When asked how long from the date of arrival prisoners are made aware of these rights, the counselor stated it must be done within thirty-days but usually is accomplished within a week.

The Auditor also interviewed 41 prisoners. Those prisoners were asked if they were told about their right to not be sexually abused, how to report a sexual abuse, the right not to be punished for reporting a sexual abuse, and how long before they were made aware of these policies. Of those questioned, 28 prisoners affirmed and acknowledged that they had received PREA information within 72-hours or immediately after arriving at the facility, 9 indicated they had not, and 3 did not recall.

The evidence collected for this provision shows that the facility has procedures in place to ensure that all prisoners receive a comprehensive education regarding their right to be free from sexual abuse, sexual harassment, and all forms of retaliation. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

### 115.33 Provision (c)

MDOC PREA Manual states in part that; “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.” MDOC Policy Directive 03.03.140 further states that, “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.”

When the Intake Officer was asked how they ensure that current prisoners, along with those transferred from another facility, have been educated on agency’s zero-tolerance policy and sexual abuse; She explained that part of her responsibility as a prison counselor is to provide all arriving prisoners with the orientation book and have them watch a PREA video. She stated that all prisoners sign a 1036 form acknowledging that the information was provided and that they understand what was presented to them. Several examples of these signed forms were provided to the Auditor in the PAQ. In addition, the Auditor reviewed 24 prisoner files. Those files show that both the CAJ 1036(a) acknowledgement form indicating the receipt of the initial PREA information at the Intake Facility and the CAJ 1036 30-day educational training form was also mostly completed at the Intake Facility.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all prisoners who have not received PREA education shall be educated within 1 year of the effective date. Also, that prisoners receive PREA education upon transfer to another facility. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

### 115.33 Provision (d):

The MRF provided examples of different prisoners PREA educational materials in formats that would be accessible to all prisoners in accordance with Title VII of the Americans with Disabilities Act, 42 U.S.C. These formats include but are not limited to: Interpreters for the deaf, reading material to the visually impaired, video in both English and Spanish with subtitles, PREA informational posters in English and Spanish, and providing Interpreters Services for non-English speaking prisoners.

MDOC PREA Manual states in part that; “The Department shall provide prisoner education in formats accessible to all prisoners, including those who are limited in English proficiency, deaf, visually impaired, or otherwise disabled, as well as to prisoners with limited reading skills.”

The MRF utilizes the MDOC contracted “Global Interpreting Services” in which services are expanded to include in-person, video, and voice translation and/or interpretation. In addition, there are subtitles that are shown during the PREA educational video to ensure all prisoners receive the information. The video is also audio for those who are visually impaired or for those who may have limited reading skills. The MRF also provided documentation of versions of their prisoner

acknowledgement form and PREA informational posters in Spanish.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the facility provide prisoner education in formats accessible to all prisoners, including those who are limited English proficient, deaf, visually impaired, and limited reading skills. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (e)

The facility utilizes two different acknowledgement forms that are signed by the prisoner and placed in the prisoner's counselor's file. One form, the 1036(a), is used to document the receipt of the initial PREA information and Form 1036 is to document the receipt of the 30-day educational information. This information was verified by the Auditor while reviewing prisoner files during the document review phase of this audit. In addition, the facility provided six examples of both the CAJ 1036 and 1036(a) signed PREA acknowledgement forms in the PAQ.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the agency maintains documentation of prisoner participation in PREA education sessions. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

#### 115.33 Provision (f)

MDOC PREA Manual states in part that; "Copies of Policy Directive 03.03.140 "Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners" and the Prisoner Handbook "An End to Silence" is available to prisoners at facility libraries. Copies of the handbook may be provided to prisoners upon request."

The MRF has posters strategically posted throughout the facility, in every housing unit, and departments (i.e., kitchen, educational and vocational classrooms) to ensure compliance with PREA standards. The Auditor personally observed these posters during the facility site review. All prisoners also has access to the MRF Prisoner Handbook which has all PREA related information documented inside located in the prison library.

The evidence collected for this provision shows that the agency has procedures in place to ensure that information will be continuously and readily available or visible to prisoners. Therefore, through written policy and personal observations, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring PREA prisoner education.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1458 416">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 454 432 488">Documents:</p> <ul style="list-style-type: none"> <li data-bbox="256 526 624 560">a) MDOC PREA Manual</li> <li data-bbox="256 598 807 631">b) MDOC Policy Directive 03.03.140</li> <li data-bbox="256 669 1182 703">c) 2019 MDOC Basic Investigator Training (BIT) Trainor Manual</li> <li data-bbox="256 741 1422 817">d) National Institute of Corrections “Investigating Sexual Abuse in Confinement Setting”</li> <li data-bbox="256 855 1342 889">e) MRF NIC PREA Investigations Exception Report Required Classifications</li> </ul> <p data-bbox="256 927 400 960">Interview:</p> <ul style="list-style-type: none"> <li data-bbox="256 999 815 1032">1. Interview with Investigative staff</li> </ul> <p data-bbox="256 1070 584 1104">115.34 Provision (a)(b)</p> <p data-bbox="256 1142 1445 1509">MDOC PREA Manual states in part that; “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. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Documentation of training attendance shall be maintained in the MDOC Training Automated Data System (TADS).”</p> <p data-bbox="256 1547 1469 1915">All sexual abuse and sexual harassment investigators who conduct non-criminal investigations at the MRF have received specialized training. This specialized training was through the National Institute of Corrections (NIC). In addition, MDOC conducts their own Basic Investigator class that covers investigating sexual abuse and sexual harassment in a confinement setting. The facility provided a spreadsheet titled “MRF NIC PREA Investigations Exception Report Required Classifications,” which indicates what officers have received the NIC training, what officers received the BIT training, and what officers have received both. The MRF identified 20 facility investigators including the Inspector.</p> <p data-bbox="256 1953 1453 2074">When interviewing the Investigative staff, the MSP Trooper stated that she had received the PREA investigative training. When interviewing the facility investigator, he was asked to describe what the training entailed. The facility investigator stated</p>

that the PREA classes dealt with the proper use of Garrity and Miranda in criminal cases, evidence collection, and interview techniques. He further explained that he received the training through the online course provided by the National Institute of Corrections (NIC) and the BIT class about five years ago.

The evidence collected for this provision shows that the agency has procedures in place to ensure that agency investigators receive specialized training in the art of investigating sexual abuse in a confinement setting. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.34 Provision (c)

MDOC PREA Manual states in part that; “Documentation of training attendance shall be maintained in the MDOC Training Automated Data System (TADS).”

The MRF has provided a spreadsheet of specialized training records for all staff trained in investigating sexual abuse in a confinement setting, to include all twenty facility investigators in the MRF. This documentation is in the form of a facility spreadsheet documenting attendance in both the completion by the National Institute of Corrections investigator class and the MDOC BIT class.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all staff responsible for investigating sexual abuse have received additional specialized training and maintains the documentation necessary to prove that training. Therefore, through written policy and personal observation by documents provided, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring specialized training for investigators who perform sexual abuse and sexual harassment investigations.

115.35	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) MDOC Policy Directive 02.05.101 (In Service Training)</p>

- b) MDOC PREA Manual
- c) Employee Transcript 2023 Report for Healthcare & Mental Health
- d) PREA Healthcare & Mental Health Course Quiz Questions

Interview:

- 1. Interview with Medical & Mental Health Staff

Observations made during the on-site audit and document review.

115.35 Provision (a)

MDOC PREA Manual states in part that; "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.
- (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."

The facility reported that there are 69 medical health staff and mental health professionals employed by the MRF who work regularly with prisoners and have received the specialized training as required by the agency's policy. This Auditor conducted an interview with the mental health staff member that is responsible for providing services at the MRF. This interview was conducted on-site. During the pre-audit phase, the Auditor was provided with a generated report from the agency's computer base training showing that medical staff and mental health staff had completed the online specialized courses.

When interviewing the Medical and Mental Health Staff, they informed the Auditor that they had previously received the specialized computer base training and receive annual PREA refresher training. They receive the additional training on the above-listed topics by going online and taking PREA online classes specifically for healthcare and mental health through the Michigan Department of Corrections Training Division.

The evidence collected for this provision shows that the agency has procedures in place to ensure that medical and mental health personnel receive additional training as outlined in this standard. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

115.35 Provision (b)

MDOC PREA Manual states in part that; “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.”

Turning Point Center performs forensic medical exams for this facility. Medical staff at this facility do not conduct forensic medical examinations. This practice was confirmed during the interview conducted with the Facility Health Service Administrator and mental health staff who stated that they do not perform forensic medical examinations. Therefore, this standard is not applicable to the MRF.

The evidence collected for this provision shows that the agency does not perform forensic medical examinations. Therefore, this provision is not applicable to the MRF facility.

115.35 Provision (c)

MDOC PREA Manual states in part that; “Documentation of training attendance shall be maintained in the MDOC Training Automated Data System (TADS).”

The MRF has provided copies of specialized training records for medical and mental health staff. This documentation is in the form of a generated report from the agency’s training automated data system.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical and mental health staff have received additional specialized training. Therefore, through written policy and documents provided, the facility has demonstrated that it meets this provision.

115.35 Provision (d)

MDOC PREA Manual states in part that; “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.”

During the pre-audit phase, the agency provided copies of training logs indicating that medical staff receive the same in-service annual PREA training that security staff receives. In addition, while interviewing medical and mental health staff the Auditor was told that they receive PREA training on an annual basis.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all medical staff receive(s) the same PREA training that volunteers, contractors, and security staff receive. In addition, they receive this training on an annual basis. Therefore, through written policy and documents provided, the facility has demonstrated that it meets this provision.

Conclusion:

	Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring specialized training for Medical and Mental health care.
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115.41	Screening for risk of victimization and abusiveness
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 03.03.140</li> <li>c) MDOC Policy Directive 05.01.140 (Prisoner Placement and Transfer)</li> <li>d) CAJ-1023 (OMNI Risk Assessment Tool)</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff performing Risk Screening.</li> <li>2. Interview with Random Prisoners</li> <li>3. Interview with PREA Coordinator</li> <li>4. Interview with PREA Compliance Manager</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.41 Provision (a)</p> <p>MDOC Policy Directive 03.03.140 states in part that; “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.” MDOC PREA Manual further states that, “All prisoners shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners. The OMNI-based risk assessment tools will be used to determine a prisoner’s risk. Staff designated by the warden shall complete both PREA Risk Assessments if any of the following occur,</p>

within 72 hours of the prisoner's arrival at a correctional facility, including intake, or whenever warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may increase the prisoner's risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners."

During the interview with the prison counselor, the Auditor went through the risk screening process. The Auditor asked if the counselor screened prisoners for risk of sexual victimization upon arrival or transfer from another facility. The counselor stated that, "Yes, he does." Also, during the interviews with 41 prisoners; 16 prisoners recalled having been asked the specific questions listed below, 13 prisoners stated they did not get asked, and 12 prisoners did not recall. The Auditor reviewed the risk assessment questionnaire called the OMNI CAJ-1023 and identified that the screening form contained the following:

- Have they been in jail before?
- Have they ever been sexually abused?
- Did they identify with being LGBT?
- Did they think they might be in danger of sexual abuse while incarcerated when they first came to prison?

The facility has provided 12 completed prisoner risk screening forms in the PAQ as evidence that the facility screens for risk of sexual abuse.

The evidence collected for this provision shows that the agency has procedures in place to ensure all prisoners receive a risk screening evaluation for the risk of being sexually abused while incarcerated. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (b)

MDOC PREA Manual states in part that; "Staff designated by the warden shall complete both PREA Risk Assessments if any of the following occur within 72 hours of the prisoner's arrival at a correctional facility, including intake and whenever warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may increase the prisoner's risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners." MDOC Policy Directive 05.01.140 further states that, "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 Prison Rape Elimination Act (PREA) Risk Assessments Worksheet (CAJ-1023) in accordance with the PREA Risk Assessment Manual."

The facility reported that they received 1035 prisoners into their facility in the last twelve months that had a length of stay of more than 72 hours. The facility reports that 100% of the prisoners received a risk screening assessment for risk of being

sexually abused during incarceration.

The facility provided samples of blank risk screening forms (CAJ-1023) during the pre-audit phase and downloaded those documents into the Pre-audit Questionnaire. In addition, the facility provided the PREA Risk Assessment Manual which explains how to conduct the risk assessment on the computerized Jail Management System. All assessments are completed by this method. Also, during the document review, the Auditor observed completed PREA Risk Screening Checklist Instrument forms in the prisoner record files.

When conducting the interview with staff responsible for performing risk-screening assessments, the facility counselor stated that he usually conducts the risk screening process within 24 hours of the prisoner being transferred to the facility. As stated in the previous provision, the Auditor interviewed 41 prisoners, for which 16 prisoners indicated that they had been questioned about sexual victimization within 72 hours of arriving at the facility. When conducting the prisoner file review, the Auditor sampled 24 prisoner files which indicated that all 22 prisoners had a risk screening performed within the first 72 hours of arriving at the facility and two exceeded the 72-hour period.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all prisoners are screened for the risk of sexual abuse within 72 hours of arrival at the facility. Therefore, through written policy, personal observations, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (c)

The risk screening assessment consists of 21 overall yes or no questions with 14 specifically addressing sexual victimization and 7 directed to possible aggression. In addition, the facility provided risk screening assessment instructions that describes if certain questions are answered 'yes', then that person could be either classified as a victim / potential victim / no score. In addition, the instructions indicate that if a prisoner answers 'yes' to a certain amount or specific victimization questions then that prisoner will be deemed a victim or potential victim. If the prisoner answers 'yes' to a certain amount of sexual aggression questions, then that prisoner will be deemed a potential sexually aggressive prisoner. The scoring system is auto-generated by the computer system. Therefore, there is no subjectivity to this assessment.

When interviewing the facility counselor, he was asked what the initial risk screening considers and what is the process for conducting the risk screening? The facility counselor indicated that the risk screening considers charges, sexual victimization, LGBTQ, first incarceration, mental health, and an array of other topics. The facility counselor also stated that the process takes place at a computer in the counselor's office by asking and then calculating yes or no answers. He also stated that certain questions allow the counselor to insert comments.

Through observations, interviews, and policy the facility has demonstrated that it uses an objective risk assessment tool to identify potential prisoners at risk of being

sexually victimized or sexually aggressive. Therefore, the facility meets this provision.

#### 115.41 Provision (d)

MDOC Policy Directive 03.03.140 states in part that, "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 questions relating to mental, physical, or developmental disabilities. Whether they are, or are perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. Whether they have been previously victimized and what is their perception of being vulnerable."

MDOC OMNI Risk Screening Tool CAJ-1036 takes into consideration at the minimum the following:

- Whether the prisoner has a mental, physical, or developmental disability
- Age of prisoner
- Physical build of prisoner
- If the prisoner has previously been incarcerated
- If the prisoner's criminal history is exclusively nonviolent
- If the prisoner has prior convictions for sex offenses
- If the prisoner is or perceived to be LGBTQ or gender nonconforming
- If the prisoner has previously experienced sexual victimization
- The prisoner's own perception of vulnerability
- Victim of a substantiated prisoner-on-prisoner sexual act
- No prisoner in the MDOC is detained or incarcerated solely for civil immigration purposes

The staff member responsible for performing risk-screening assessments (prison counselor) was asked what the risk screening considered and what is the process for conducting these assessments. The counselor stated the assessment asks questions such as has the prisoner been sexually abused in the past, sexual relationships in confinement, gender identity, prior convicts of sexual assault, and the age and stature of the prisoner. Finally, the counselor stated that the screening is conducted face to face and software in OMNI assists in identifying potential prisoner victims or aggressors. He also stated that mental health services makes the determination related to if the prisoner suffers from mental or developmental disability issues.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the intake screening shall consider, at a minimum, the 10 criteria identified in this standard provision. Therefore, through written policy and interviews

conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (e)

The risk screening form (OMNI CAJ-1036) utilized by the MRF staff does consider prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional sexual abuse. The staff member responsible for performing risk-screening assessments was asked what the risk screening considered and what is the process for conducting these assessments. The counselor stated the assessment asks questions such as: has the prisoner had prior acts of sexual abuse in the past, prior convicts of sexual assault, and are they known to the agency as a prior sexual abuse aggressor.

The evidence collected for this provision shows that the agency has procedures in place to capture and ask the questions listed above surrounding potential aggressor behavior. Therefore, through document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (f)

MDOC PREA Manual states in part that; "In addition to the PREA Risk Assessments required above, staff designated by the Warden shall complete a PREA-Risk Assessment Review-Prison if any of the following occur, within 30 calendar days of a prisoner's arrival at a correctional facility, including intake and it has been 12 months since the last review. The assessment shall be completed using information contained in the prisoner's file and in electronic databases available to staff, and gathered during discussions with the prisoner." MDOC Policy Directive 05.01.140 further states that, "Designated staff shall complete a PREA-Risk Assessment Review-Prison form on all transferred prisoners no later than 30 calendar days after the prisoner's arrival at the facility, unless the prisoner transfers to another facility within the 30 calendar days."

During the pre-audit, the facility reported 1010 prisoners that entered the facility over the last twelve months and had a stay of more than 30 days. Out of those prisoners, the agency reported all 748 prisoners were reassessed 30 days after their arrival at the facility for risk of sexual victimization based upon any additional relevant information received since intake over the last twelve months.

The staff member responsible for performing risk-screening assessments was asked how long after arrival are prisoners risk levels reassessed. The facility counselor stated that between 14 and 30 days from initial arrival to the facility. When interviewing 41 prisoners, they were asked if staff had ever asked PREA related questions again during their incarceration. 10 prisoners stated that they had, 18 prisoners stated that they had not, and 13 prisoners could not recall. The facility performs the subsequent risk screening during the initial interview process and orientation after transfer to the facility. The facility has provided a reassessment screening form which includes questions concerning sexual safety and victimization. The Auditor reviewed 24 prisoner files and observed evidence of 30-day reassessment screening in all 24 files.

The evidence collected for this provision shows that the agency has procedures in place to conduct 30-day risk screening reassessments based upon additional or relevant information received by the facility. They also have a tool to attempt to extract additional sexual safety information. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (g)

MDOC PREA Manual states in part that; “Staff designated by the warden shall complete both PREA Risk Assessments if any of the following occur, whenever warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may increase the prisoner’s risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners.”

When interviewing the staff responsible for conducting risk screening the counselor stated that they do reassess when warranted due to additional information received about the prisoner’s sexual safety.

The evidence collected for this provision shows that the agency has procedures in place to reassess a prisoner’s risk of sexual victimization due to a referral, request, or additional information. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 Provision (h)

MDOC PREA Manual states in part that; “Prisoners may not be disciplined for refusing to answer or not disclosing complete information in response to questions relating to mental, physical, or developmental disabilities, whether they are, or are perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous victimization, or their own perception of vulnerability.”

When interviewing the staff responsible for conducting risk screening, the counselor stated that the agency does not punish prisoners if they choose not to answer the questions associated with the risk screening assessment.

The evidence collected for this provision shows that the agency has procedures in place to prevent prisoners from being disciplined for refusing to answer or for not disclosing complete information in response to risk screening. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.41 (i)

MDOC PREA Manual states in part that; “Information obtained during the risk assessment process shall be treated as confidential information and only shared with designated staff in accordance with Department policy. Risk assessment information shall not be shared with prisoners.”

When interviewing the PREA Manager, he was asked who has access to the prisoners’

	<p>risk screening information. The manager explained that the information is stored in the agency computer program and is protected by permission-based access, only authorized on a need-to-know basis. The PREA MRF Coordinator echoed those same remarks and reiterated that permissions are limited to those who have a need to know. The staff member responsible for conducting risk screening (prison counselor) explained that only certain positions have access depending on their job description and permissions granted by the computer system such as: counselors and supervisors.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to control access to the risk screening information collected by the facility and that the information is not exploited. Therefore, through document review and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring screening for risk of victimization and abusiveness.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 03.03.140</li> <li>c) MDOC Policy Directive 04.06.184 (Gender Dysphoria)</li> <li>d) Gender Identity Housing Requests</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff performing Risk Screening</li> <li>2. Interview with PREA Compliance Manager</li> <li>3. Interview with Transgender prisoners</li> </ul> <p>Observations made during the on-site audit and document review.</p>

115.42 Provision (a)

MDOC PREA Manual states in part that; “The results of the Risk Assessment shall be considered when making housing, bed, work, education, and program assignments with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive.” MDOC Policy Directive 03.03.140 further states that, “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.”

The MRF PREA Coordinator stated during the interview that risk screening is part of the initial orientation process and that they try to make sure possible victims are kept separate from possible abusers. The staff member responsible for conducting risk screening stated during his interview that the assessment is used to gather information to determine housing, education, work assignments, and programs and to make sure you are not housing potential victims with potential aggressors.

The evidence collected for this provision shows that the agency uses the information gathered during the risk screening process to influence the decision on where a prisoner may be housed, attend programs, and where a prisoner works. Keeping separate those prisoners at elevated risk of being sexually victimized. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.42 Provision (b)

MDOC PREA Manual states in part that; “In addition to other classification considerations, facility staff shall use information from the risk assessment to inform housing, bed, work, education, and program assignments with the goal of keeping prisoners at high risk of being sexually victimized separate from prisoners at high risk of being sexually abusive. These decisions shall include individualized determinations addressing how to ensure the safety of each prisoner. Risk assessment scores will affect bed assignments as follows, (V) or (PV) shall be placed in the same cell, pod, or room with a (V), (PV) or (NS). (A) or (PA) shall be placed in the same cell, pod, or room with an (A), (PA) or (NS). (NS) may be placed in the same cell, pod, or room with any score.”

During the interview process, the Auditor asked the staff member responsible for risk screening how the agency uses the information from the risk screening to keep prisoners safe. The counselor stated that the information gathered during the screening is to identify who may be a potential prisoner victim and who may be a possible prisoner aggressor and house those prisoners accordingly.

The evidence collected for this provision shows that the agency makes individualized determinations about how to ensure the safety of each prisoner. Therefore, through document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (c)

MDOC PREA Manual states in part; “In deciding whether to assign a transgender, intersex, or GD prisoner to a facility for male or female prisoners, and in making other housing and programming assignments, facility staff shall consider on a case-by-case basis whether a placement would compromise the prisoner’s health and safety and whether the placement would present management or security problems to the MDOC. This placement is determined pursuant to Policy Directive 04.06.184 ‘Gender Identity Disorders (GID)/Gender Dysphoria.’” MDOC Policy Directive 04.06.184 states in part that, “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.”

The MRF PREA Coordinator was interviewed and asked how the agency determines housing and programs for transgender or intersex prisoners. The MRF PREA Coordinator stated that a MDOC Transgender Committee from Lansing, Michigan determines housing and programs in these situations. The MRF PREA Coordinator also indicated that the prisoner’s request would be taken into consideration and that the prisoner would have full access to all programs.

The Auditor conducted interviews with three transgender prisoners. All three prisoners indicated that they were asked about concerns for their safety.

The evidence collected for this provision shows that the facility does consider housing assignments involving transgender and intersex individual on a case-by-case basis. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (d)

MDOC PREA Manual states in part that; “At MDOC prisons, placement and programming assignments for each identified transgender, intersex or GD prisoner shall be reassessed by health care or mental health care staff at least twice each year to review any threats to safety of the prisoner.”

When interviewing the staff member responsible for conducting risk screening assessments was asked if all prisoners that identify as transgender or intersex have a re-assessment twice a year to make sure there is not a threat to their safety. The member responsible for conducting risk assessments stated, “No.” However, when interviewing the MRF PREA Coordinator he explained that healthcare performs the twice a year reviews regarding transgender prisoners when they perform the prisoner’s management plans.

The evidence collected for this provision shows that the agency has procedures in place to address reassessing a transgender or intersex prisoners programming assignment at least twice a year to review any threats or safety concerns. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.42 Provision (e)

MDOC PREA Manual states in part that; "A transgender, intersex or GD prisoner's own views with respect to his or her own safety shall be given serious consideration in placement decisions." MDOC Policy Directive 04.06.184 further states that, "The prisoner's own views with respect to his or her own safety shall be given serious consideration. The evaluations and the historical records shall be saved and documented in the Prisoner Health Record."

When the MRF PREA Coordinator was asked if the facility considers a transgender's own views with respect to their safety, he stated that, "Yes, they can always reach out to the Inspector if they feel unsafe." When the staff member responsible for conducting the risk-assessment was asked the same question, he stated that yes they can be housed with other prisoners diagnosed with gender dysphoria. He also responded by stating that they do consider the transgender prisoners own views when determining housing assignments.

The Auditor conducted interviews with three transgender prisoners. Two prisoners indicated that they were asked about concerns for their safety and one prisoner stated that their concerns were not considered.

The evidence collected for this provision shows that the agency has procedures in place to consider a transgender or intersex prisoner's own view with respect to his or her own safety shall be given serious consideration. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (f)

MDOC PREA Manual states in part that; "Transgender, intersex and GD prisoners shall be given the opportunity to shower separately from other prisoners."

The MRF PREA Coordinator and the staff member responsible for conducting risk assessments were interviewed and asked if transgender and intersex prisoners are afforded the opportunity to shower separately from other prisoners, the counselor stated that, "Yes, they are allowed to shower separately during count times." The Compliance Manager stated, "Yes, during count and lockdown." The Auditor interviewed three transgender prisoners and they all indicated that they are allowed to shower separately, specifically stating they could shower during "lockdown/headcount."

The evidence collected for this provision shows that the agency has procedures in place to allow transgender and intersex prisoners to shower separately from other prisoners. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.42 Provision (g)

MDOC PREA Manual states in part that; "Prisoners shall not be placed in dedicated facilities, units or wings solely on the basis of sexual orientation or gender identity status unless such placement is for the safety and security of the prisoner, is in a

	<p>dedicated facility, unit or wing established in connection with a consent decree, legal settlement or court order.”</p> <p>During the interview process, the MRF PREA Coordinator and PREA Manager confirmed that the agency was not under any consent decree, legal settlement, or legal judgment requiring the facility to separate the LGBTQ community from everyone else. The PREA Manager stated during his interview that it is against policy and standards to segregate those prisoners identified as LGBTQ solely on their sexuality. Finally, the Auditor interviewed three transgender prisoners that confirmed they were not being housed in a unit solely based on their sexual orientation or status.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address not placing LGBTQ prisoners in designated housing blocks based solely on their sexual orientation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the use of screening information.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 04.05.120 (Segregation Standards)</li> <li>c) MRF PREA Coordinator memorandum regarding no incidents of prisoners of high risk of sexual victimization requiring involuntary placement in segregated housing</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Warden</li> <li>2. Interview with Staff who supervise prisoners in segregated housing</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.43 Provision (a)</p>

MDOC PREA Manual states in part that; “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.” MDOC Policy Directive 04.05.120 further states that, “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.”

The Warden stated during his interview that the agency does have a policy prohibiting placing prisoners at high risk of sexual victimization in involuntary segregated housing in lieu of other housing areas. The MRF PREA Coordinator provided a memorandum confirming that the facility has not experienced a situation where a prisoner at high risk of sexual victimization was housed in involuntary segregation over the last twelve months.

The evidence collected for this provision shows that the agency has procedures in place to address not using segregated housing for those prisoners at high risk of victimization unless no alternative means of separation is available. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.43 Provision (b)

MDOC PREA Manual states in part that; “Prisoners placed in temporary segregation for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to these opportunities, the facility shall document:

- (1) The opportunities that have been limited.
- (2) The duration of the limitation; and
- (3) The reasons for such limitations.”

The facility reported no instances where a prisoner was placed in segregation based on the high probability of sexual victimization. During the facility tour, the Auditor visited the Segregation Unit. There was no evidence that suggested any prisoner being housed in the segregation unit due to their risk for sexual victimization. The Auditor also reviewed the housing assignments to verify that no prisoner was being housed involuntarily due to the risk of being sexually victimized.

During the interview with a staff member that supervises prisoners in the segregation unit, he was asked if prisoners that are housed in segregation due to their risk of

sexual abuse would have the same privileges and access to all other programs as any other prisoner. The officer indicated that any prisoner segregated for administrative purposes are still entitled to phone privileges, visits, and yard as long as they are not on disciplinary segregation. The Auditor did not interview a prisoner housed in a segregated housing unit due to possible victimization because the facility reported no instances of such a situation and the Auditor found no evidence of this circumstance.

The evidence collected for this provision shows that the agency has procedures in place to ensure that if a prisoner is placed in segregation due to the high risk of being sexually victimized that the prisoner would retain all the privileges and opportunities that all other prisoners are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.43 Provision (c)

MDOC PREA Manual states in part that; "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 Policy Directive 04.05.120 'Segregation Standards' for a time period not to ordinarily exceed 30 calendar days."

The facility reported no instances where a prisoner was placed in segregation based on the high probability of sexual victimization.

The Warden was interviewed and stated that only if there were no alternatives would a prisoner be involuntarily segregated because of the possibility of being sexually victimized. The Warden explained, that at the most, a prisoner would stay in segregation for no more than 30 days and then he would have the prisoner transferred to another facility if necessary. The Officer assigned to segregation stated that the SCC Team comes around daily to evaluate those prisoners in segregation and they would determine when and where the prisoner is moved. He further stated that each prisoner is seen by the SCC Team every seven days.

The evidence collected for this provision shows that the agency has policies in place to ensure that if a prisoner is placed in involuntary segregation, such assignment would not exceed 30 days. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.43 Provision (d)

MDOC PREA Manual states in part that; "If a temporary segregation assignment is made pursuant to this section and Policy Directive 04.05.120, the facility shall clearly document the basis for the facility's concern for the prisoner's safety and the reason why no less restrictive means of separation can be arranged."

The MRF PREA Coordinator provided a memorandum indicating that the facility did not have an incident where a prisoner at high risk of victimization was placed in segregated housing until an alternative could be found and this will not ordinarily exceed 30 days. The Warden indicated that the facility will clearly document the basis

for their concern for the prisoner’s safety and the reason why no alternative could be found if they experienced such an event. There was no such event that occurred during this audit period.

The MRF has reported no instances of assigning any prisoner to involuntary segregated housing for the purpose of separating that prisoner due to the high risk for sexual victimization.

The evidence collected for this provision shows that the agency does have a written policy in place to address documenting the basis for the segregation and why no alternative means of separation could be arranged. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

115.43 Provision (e)

MDOC PREA Manual states in part that; “Every 30 calendar days, the facility shall afford the prisoner a review to determine whether there is a continuing need for separation from the general population.”

During the interview with the officer assigned to segregation, he was asked once a prisoner is assigned to involuntary segregation, does the facility review the prisoner’s situation every 30 days to determine if the housing assignment is still appropriate. The officer stated that, “Yes, all prisoners in segregation are seen every seven days.”

The evidence collected for this provision shows that the agency has procedures in place to reassess and review a prisoner’s housing assignment every 30 days to see if there is a continued need for separation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence the PREA Auditor has determined that the facility is fully compliant with this standard requiring limitations on protective custody.

115.51	Inmate reporting
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"><li>a) MDOC PREA Discharge Reporting Information (CAJ-1039)</li><li>b) MDOC PREA Manual</li></ul>

- c) MDOC Policy Directive 03.03.140
- d) MDOC Sexual Violence Trifold
- e) Facility Reporting Posters
- f) Memorandum dated 01/14/2020 regarding MDOC not housing detainees for civil immigration purposes.
- g) MDOC Policy Directive 05.03.118 (Prisoner Mail)
- h) Memorandum of Understanding between the MDOC and The Legislative Corrections Ombudsman dated 12/17/2014
- i) MDOC Prisoner Guidebook
- j) PREA Training Course Unit 3 (Staff Reporting)

Interviews:

1. Interviews with random staff
2. Interviews with various prisoners
3. Interview with PREA Compliance Manager

Observations made during the on-site audit and document review.

115.51 Provision (a)

The facility has provided multiple ways to report a sexual abuse or sexual harassment allegations in a private setting. These reporting options are listed in written policy, confirmed through interviews, and observed through posters and handouts. MDOC Policy Directive 03.03.149 specifically addresses six ways to report an allegation of sexual abuse or harassment. Those include making a verbal or written report to appropriate supervisory staff, through the MDOC Sexual Abuse Hotline, completing the departments sexual abuse complaint form on the MDOC website, contacting the PREA Manager, contacting the MDOC Internal Affairs Section, and through the external reporting agency Ombudsman. The contact information and phone numbers are provided in the Prisoner Guidebook, PREA Sexual Violence Trifold, facility posters, and the PREA Prisoner Discharge Information form (CAJ-1039). In addition, PREA posters are displayed throughout the facility both in English and in Spanish listing the ways an individual can report an allegation of sexual abuse. The staff training curricula consists of classroom instruction and an on-line training portal that provides staff ways to report. Those ways are verbally to any supervisor, PREA Coordinator, Warden, MDOC hotline, or contact the outside reporting agency via Ombudsman.

During the on-site audit, the Auditor performed 12 random staff interviews and 41 prisoner interviews. Of the 12 random staff that were interviewed: 1 staff member could identify four ways to report, 2 staff members could identify three ways, and 9 staff members could identify 2 ways to report. Of the 41 prisoners that were

interviewed: 2 prisoners could offer 4 ways to report sexual abuse, 6 prisoners could offer three ways, 18 prisoners identified two ways and 11 prisoners provided at least one way to report. In addition, there were 4 prisoners that indicated that they would not report the incident at all.

During the on-site review, the Auditor observed and documented PREA posters posted in both housing units and in public areas throughout the facility. The Auditor contacted Just Detention International and confirmed that they had not received any sexual abuse allegations during this rating period. The Auditor test called the MDOC hotline reporting entity while conducting the on-site facility tour. The call was made on 4/16/2024 at approximately 1647 hours. The PREA Regional Analyst received an email confirming receipt of the call on the next day at approximately 1252 hours and forwarded the email chain to the Auditor. Finally, the Auditor had multiple conversations with prisoners during the facility tour asking them if they knew how to report sexual abuse. Those prisoners indicated by utilizing the phone PREA hotline, verbally to staff, and/or writing a kite.

When reviewing the investigative files, the Auditor documented that allegations were made via the hotline one time, verbally to staff seven times, written ten times, third-party once and to the MDOC Internal Affairs once.

The evidence collected shows that the facility has provided multiple ways to report sexual abuse or sexual harassment. The evidence also shows that many staff and prisoners are aware of those reporting procedures by confirming the information is being provided. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.51 Provision (b)

The facility has provided information regarding the Legislative Corrections Ombudsman as the way to report to the outside entity and providing a mailing address that a prisoner or staff can write if they choose to report allegations of sexual abuse. The mailing address is made available in the Prisoner Guidebook, Sexual Violence Trifold, and the PREA Discharge Information form (CAJ-1039). During the facility site review, the Auditor interviewed two prison counselors who are responsible for collecting all legal mail and forwarding that mail to the appropriate recipient. The Auditor was made aware during these interviews, that in order to accept any legal mail, the prisoner must provide their name and prisoner number on the outside of the envelope, or the mail would not be accepted. The Auditor was concerned that this practice did not allow the prisoner to remain anonymous in accordance with this provision.

MDOC PREA Manual states in part that; "Prisoners may report sexual abuse or sexual harassment to the Michigan Legislative Corrections Ombudsman's Office. Upon receipt of a complaint, the Ombudsman's Office shall immediately forward the complaint in writing to the Department PREA Manager on the Prison Rape Elimination Act (PREA): Sexual Abuse/Harassment Referral form. The prisoner may remain anonymous upon request. The Department PREA Manager shall ensure that an investigation into the allegation, if not already completed, is initiated."

MDOC Policy Directive 05.03.118 further states in part that; “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: the Office of the Legislative Corrections Ombudsman.

The facility also provided a MOU between the MDOC and the Office of the Legislative Corrections Ombudsman. The MOU states that, “The purpose of this Agreement is to provide a way for prisoners, sentenced to a term of imprisonment with the MDOC, to report sexual abuse or harassment to the LCO, pursuant to Prison Rape Elimination Act (PREA) of 2003, 28 CFR Part 115. The LCO is able to receive and immediately forward prisoner reports of sexual abuse and sexual harassment to MDOC officials, allowing the prisoner to remain anonymous upon request. LCO shall accept prisoner reports made verbally, in writing anonymously and from third parties and shall promptly document any verbal reports, § 115.51(b), § 115.54.”

When conducting interviews with 41 prisoners, 27 prisoners acknowledged being aware that a sexual abuse allegation can be made anonymously, while 10 indicated that they were not sure if they could report anonymously, and 4 stated, “No.” When interviewing the MRF PREA Coordinator, he was asked how the facility provides a way for a prisoner to report a sexual abuse to a public or private entity that is not part of the agency. The MRF PREA Coordinator confirmed the use of the Legislative Corrections Ombudsman as their method of providing an outside entity. Finally, when reviewing the twenty investigative files the Auditor documented no instances where the Corrections Ombudsman had been used to initiate a sexual abuse investigation at the MRF.

Finally, the facility provided a memo dated 01/14/2020 written by the Analyst of the Compliance Division stating that, “The Michigan Department of Corrections does not detain prisoners solely for civil immigration purposes.”

The evidence collected for this provision shows that the agency has provided at least one way for a prisoner to report abuse or harassment to a public or private entity not affiliated with the agency. In addition, the MRF does not allow the detention of a prisoner for the sole purpose of immigration status. However, the Auditor initially did not believe that the agency’s reporting mechanism to report to an outside entity allowed for the prisoner to remain anonymous through legal mail practices at this facility. Therefore, the Auditor required corrective action on this particular provision. The agency pursued guidance from their Office of Legal Affairs. The Auditor and staff from the MDOC PREA Unit engaged in many scheduled meetings and conversations. The MDOC Office of Legal Affairs proffered that because the Legislative Corrections Ombudsman is utilized for many different aspects within the MDOC to address inmate

concerns, such as administrative due process, agency grievance procedures, and allegations of misconduct, there is no reasonable expectation that any staff member or inmate would conceivably know that an inmate was writing to the Ombudsman for the sole purpose of alleging sexual abuse or sexual harassment. Therefore, even if the inmate places their name and inmate number on the outside of the envelope in accordance with policy, this practice does not cause the inability for the inmate to remain anonymous upon request. All correspondences with the Ombudsman requires this method to send legal mail. The Ombudsman by way of the agreed upon MOU would keep the inmate's identity unknown. The Auditor analyzed this position or view and agreed that an inmate would be able to remain anonymous upon request by using the current practice.

Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it does meet this provision.

#### 115.51 Provision (c)

MDOC PREA Manual states in part that; "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."

During staff interviews, the officers explained that their duties were to immediately write a report recording the verbal sexual allegation. When interviewing prisoners, several explained that they would notify a supervisor or security officer. The officers also stated that the report would be immediate. When further questioned about the term "immediate" the officers stated no later than by the end of their shift. In addition, all the PREA posters and written correspondence provided and displayed throughout the facility state that an allegation of sexual abuse can be reported verbally. When interviewing the prisoners, all 41 acknowledged being able to report verbally and/or in writing. During the investigative case file review, the Auditor documented seven allegations being initiated verbally to staff.

The evidence collected for this provision shows that the agency has demonstrated that they accept, and document sexual abuse reports verbally, in writing, and from third parties. It has also been determined that these reports have been handled in a timely fashion. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.51 Provision (d)

MDOC PREA Manual states in part that; "Staff may privately report sexual abuse and sexual harassment allegations through their chain of command, via the MDOC Sexual Abuse Hotline message line, MDOC website or by writing to the Internal Affairs Division. Response to allegations made using these methods will be taken seriously, entered into the appropriate MDOC computerized database as outlined above and investigated." In addition, the facility provides the employee PREA training course unit 3, which outlines the ways staff can report sexual abuse allegations in a private manner. Those methods are to a supervisor, PREA Coordinator, Warden, Ombudsman, and Hotline.

	<p>Of the 12 random staff members interviewed: the hotline was mentioned twice, the MRF Facility PREA Coordinator was mentioned four times, the Ombudsman once, the State Police once, Civil Service once, and three staff members were not sure.</p> <p>The evidence collected for this provision shows that the agency has demonstrated that they do provide staff with a private method of reporting sexual abuse or sexual harassment of prisoners. Therefore, through written policy, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Recommendation</p> <p>The Auditor is recommending that the facility provide refresher training to all security staff as to how staff can report a sexual abuse allegation about a prisoner privately in accordance with agency PREA Policy Directive 03.03.140.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is not fully compliant with this standard requiring the agency provide multiple internal ways for prisoners to privately report sexual abuse or sexual harassment.</p>
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<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC Policy Directive 03.03.140</li> <li>b) Class Settlement Agreement dated 02/26/2020</li> <li>c) MDOC PREA Manual</li> <li>d) Director’s Office Memorandum 2017-2</li> </ul> <p>Interviews:</p> <p>Observations made during the on-site audit and document review.</p> <p>115.52 Provision (a)(b)(c)(d)(e)(f)(g)</p> <p>MDOC Policy Directive 03.03.140 states in part that; “The MDOC has eliminated the administrative grievance procedure for addressing prisoner grievances regarding</p>

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.”

MDOC PREA Manual states in part that; “Prisoners may file a PREA Grievance at any time regarding alleged sexual abuse. Prisoners must follow the PREA Grievance process as outlined in Policy Directive 03.03.140 “Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving PRISONERS.” All allegations of sexual abuse contained within a grievance must be referred to the appropriate custody supervisor for investigation in accordance with Policy Directive 01.01.140 “Internal Affairs”, Policy Directive 03.03.140 “Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Offenders,” and this manual.

For grievances containing allegation(s) of sexual abuse, the Department shall not:

- (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.

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. 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. 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. 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. 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 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 at 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 Policy Directive 03.02.130 "Prisoner/Parolee Grievances" and Policy Directive 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 Policy Directive 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 Policy Directive 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 Policy Directive 01.01.140 "Internal Affairs", Policy Directive 03.03.140 "Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Offenders," and this manual.

In addition, the facility has provided a Director's Office Memorandum 2017-2 which states that, "The Manual shall control where in conflict with any current policy requirements, including requirements set forth in Policy Directive 03.03.140 'Prohibited Sexual Conduct Involving Prisoners.'"

Lastly, the facility has provided a Class Action Settlement Agreement dated 02/26/

2020 whereas the MDOC has agreed in the Circuit Court of Michigan to abolish the emergency grievance procedure as it relates to reporting sexual abuse and sexual harassment. This is part of an equitable relief settlement agreement authorized by a Circuit Court Judge in the Michigan Judicial System. The current practice is that the MRF abides by MDOC Policy Directive 03.03.140 and does not recognize or provide any emergency grievance procedures. Because there are multiple contradictions regarding policy and guidance the Auditor has determined that a Judicial Order supersedes any Director's Office Memorandum and therefore, MDOC no longer provides emergency grievance procedures to report sexual abuse.

Recommendation: The Auditor is recommending that the MDOC's Director's Office resend Director's Office Memorandum 2017-2 in order to amend and clarify the MDOC PREA Manual, so that it coincides with current policy and practice established by a Class Action Settlement.

**Conclusion**

The agency has no policy related to what allegations can be handled through the grievance process. The agency's procedure is that grievances received about sexual assault and sexual harassment will be accepted and reviewed regardless of when the incident took place. The agency protocol is if the Warden or Facility PREA Coordinator receives a grievance alleging sexual abuse or sexual harassment by a prisoner, the grievance is immediately handled as a PREA complaint and investigated as such, to include assigning it to a PREA Investigator for further investigation. The grievance process is immediately stopped, and an administrative investigation is immediately initiated. Therefore, this standard is not applicable in the meaning and purpose for which it is intended. The grievance process is to serve as a vehicle to provide due process in certain situational incidents in a confinement setting and not the purpose of reporting or investigating a sexual abuse allegation in this facility. However, a prisoner can use the "grievance" process as a means of reporting sexual abuse allegations. The prisoners can also use the grievance process to oppose the finding of a sexual abuse investigation as part of their due process and administrative remedies.

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:  Documents:  a) MDOC Policy Directive 03.03.140

- b) MDOC PREA Manual
- c) MRF Operating Procedure 05.03.130 (Prisoner Telephone Use)
- d) Just Detention International (JDI) Posters in English & Spanish
- e) Facility PREA Coordinator memorandum regarding Standard 115.53 (a)
- f) An Inside Line Introduction Letter for MDOC staff and prisoners by JDI
- g) Memorandum of Understanding between MDOC and JDI dated 04/18/2018

Interviews:

1. Prisoners who reported a Sexual Abuse
2. Interviews with Random Prisoners

Observations made during the on-site audit and document review.

115.53 Provision (a)

MDOC PD 03.03.140 states in part that; "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." MDOC PREA Manual further states that, "The Department shall provide prisoners with access to outside victim advocates for emotional support services related to sexual abuse. The Department PREA Manager will attempt to establish a referral process and/or maintain agreements with community service providers to provide these services. Agreements with these organizations will be documented and facilities will be provided with information regarding local, approved organizations and their mailing addresses and/or telephone numbers as appropriate."

The agency has entered into a Memorandum of Understanding with "Just Detention International" to provide outside victim advocacy related to sexual abuse. Stated in the MOU, the MDOC has agreed to provide incarcerated sexual abuse survivors access to JDI's sexual abuse support line toll free number, at no cost to the prisoner. Provide prisoners with confidential and anonymous access to JDI's sexual abuse support line and with confidential mailing to JDI, during the life of the agreement. Will work with JDI to educate MDOC prisoners about the sexual abuse support line and available victim services and the level to which services are confidential. Just Detention will provide a statewide, sexual abuse support line for incarcerated sexual abuse survivors in MDOC's facilities. The sexual abuse support line will be available to all survivors of sexual abuse and sexual harassment regardless of where and when the abuse occurred. The sexual abuse support line will be staffed Monday-Friday, from 11am to 9 pm Eastern Time.

The Auditor observed JDI posters during the facility tour. In addition, every prisoner that is transferred to the MRF receives an initial orientation. During this orientation, the prisoner is once again provided contact information for the rape crisis center. This procedure is documented and acknowledged by signature from the prisoner. The

advocate phone call is free of charge to the prisoner. Outgoing facility mail is to JDI is treated as legal mail and not opened or read. The crisis intervention services are confidential, and Just Detention has no duty to report unless involving a juvenile or vulnerable adult or if the prisoner chooses to report.

During the on-site audit, the Auditor performed 41 prisoner interviews. 23 prisoners were aware that services are available outside the facility for dealing with sexual abuse and 14 prisoners stated that they were not sure or unaware of such services and 4 stated, "No." Those prisoners that were aware of the services also knew how to contact the crisis center. They were also cognizant that the communication with the crisis advocate is confidential. The prisoners that reported sexual abuse stated that the facility did not provide them with phone numbers or mailing addresses of outside services because they declined those services. The Auditor reviewed these investigative files and observed documentation that the prisoners were offered both medical and mental health services.

The evidence collected for this provision shows that the agency has procedures in place to provide crisis intervention services from an outside advocacy group free of charge that is confidential. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.53 Provision (b)

MDOC PREA Manual states in part that; "Prisoners are aware of the extent to which such communications will be monitored as outlined in Policy Directive 05.03.118 Prisoner Mail and Policy Directive 05.03.130 Prisoner Telephone Use. Prisoners shall be informed of the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws."

The MRF informs prisoners through a pre-recorded phone message that their calls may be monitored before making every call. The prisoner initial orientation also informs the prisoners that their calls are subject to monitoring and may be referred out for investigation. The MOU between the MDOC and Just Detention states that; "MDOC will provide prisoners with confidential and anonymous access to JDI's sexual abuse support line and with confidential mailing to JDI, during the life of this agreement."

The MRF PREA Coordinator confirmed to the Auditor that the phone number provided to prisoners for private advocate counseling to JDI is not monitored or recorded. Therefore, the communication between prisoners and JDI remains confidential when the prisoner calls the toll-free number. In addition, all JDI "AN Inside Line" posters state that the calls are confidential, anonymous, unmonitored, and free of charge. These posters were observed in every housing block.

The Auditor performed 41 prisoner interviews. In those interviews, the 26 prisoners that were aware of these services assumed that the information would remain confidential.

The evidence collected for this provision shows that the facility does inform prisoners

the extent to which their communications are being monitored. Therefore, through agency procedures, personal observations, and interviews conducted the facility has demonstrated that it meets this provision.

115.53 Provision (c)

MDOC PREA Manual states in part that; “The Department PREA Manager will attempt to establish a referral process and/or maintain agreements with community service providers to provide these services. Agreements with these organizations will be documented and facilities will be provided with information regarding local, approved organizations and their mailing addresses and/or telephone numbers as appropriate.”

The facility has provided a copy of a MOU between the MDOC and Just Detention International dated 04/18/2018, as proof that confidential emotional support services are being provided to the prisoners at the MRF during the entire rating period.

The evidence collected for this provision shows that the agency has entered into a Memorandum of Understanding with an outside advocacy group to provide the prisoners emotional support as it relates to sexual abuse. Therefore, through the signed MOU and personal observation the facility has demonstrated that it meets this provision.

Conclusion

Based upon the review and analysis of all the available evidence, the Auditor has determined that the facility is fully compliant with this standard requiring the facility provide prisoners access to outside confidential support services.

115.54	Third-party reporting
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"><li>a) MDOC PREA Manual</li><li>b) Legislative Corrections Ombudsman MOU</li><li>c) MDOC Public Website</li><li>d) MDOC Online Reporting</li></ul> <p>Observations made during the on-site audit and document review.</p>

	<p>115.54 Provision (a)</p> <p>MDOC PREA Manual states in part that; “The MDOC Sexual Abuse Hotline and website Complaint form are available to staff, the public and third-party complainants.”</p> <p>The MRF has the following information published on their MDOC agency website explaining how someone would report a sexual abuse on behalf of a prisoner housed in the MRF.</p> <p>In 2003, Congress enacted The Prison Rape Elimination Act (PREA) which established a zero-tolerance standard for the incidence of prison rape within any confinement facility of a federal, state, or local government. Thereafter, it developed and implemented national standards, effective August 20, 2013, for gathering data, as well as the detection, prevention, reduction, and punishment of prison rape.</p> <p>The Michigan Department of Corrections (MDOC) is committed to ensuring a safe and humane environment for all prisoners. The MDOC maintains a zero policy of sexual violence against prisoners and investigates allegations of sexual harassment, abuse, misconduct, and overfamiliarity. Sexual abuse against prisoners is a violation of Department policy, institutional rules, and is a crime whether by staff or other prisoners.</p> <p>The agency provides an “Online Reporting Form” for the public to report sexual abuse on behalf of prisoners.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address third-party reports of sexual abuse or harassment both formally and publicly. Therefore, through document review and personal observations, the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a method to receive third-party reports alleging sexual abuse and distribute that information publicly.</p>
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<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p>

- a) MDOC PREA Manual
- b) MDOC Policy Directive 03.03.140
- c) MDOC Employee Handbook

Interviews:

- 1. Interviews with Random staff
- 2. Interview with Warden
- 3. Interview with Medical and Mental Health Staff
- 4. Interview with PREA Coordinator

Observations made during the on-site audit and document review.

115.61 Provision (a)

MDOC PREA Manual states in part that; "In accordance with Policy Directive 03.03.140 'Prison Rape Elimination Act (PREA) and 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. Reports shall be taken regardless of when the incident was alleged to have occurred. Information includes retaliation against prisoners or staff who reported such an incident as well as any staff action or work rule violation that may have contributed to an incident or retaliation. These reports may be made privately to the appropriate supervisory staff or through the MDOC Sexual Abuse Hotline or by completing a Department Sexual Abuse/Sexual Harassment Complaint form on the MDOC website." MDOC 03.03.140 further states that; "Employees shall immediately report in writing any knowledge, suspicion, information, or observation of "Conduct prohibited by this policy to the appropriate supervisor and the facility PREA Coordinator, regardless of the method of the report."

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor. In addition, the facility provided multiple examples of a verbal reports of sexual abuse or harassment that was reported and investigated.

The evidence collected for this provision shows that the agency has procedures in place to address immediately reporting any knowledge, suspicion, or information regarding sexual abuse or sexual harassment. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

115.61 Provision (b)

MDOC PREA Manual states in part that; "Information related to a sexual abuse and

sexual harassment allegations shall not be revealed to anyone other than to the extent necessary for treatment, investigation or other security and management decisions.”

During the interview process, the Auditor interviewed 12 random staff. All 12 staff members stated that they must immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment to their supervisor and must only relay information on a ‘need to know’ basis.

The evidence collected for this provision shows that the agency has procedures in place to address not revealing information related to a sexual abuse report to anyone other than to the extent necessary. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (c)

MDOC PREA Manual states in part that; “Health care and mental health care 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. Medical and mental health care staff shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting. A copy of the prisoner’s informed consent shall be maintained for the PREA audit. Upon receiving an allegation that a prisoner was sexually abused, medical and mental health care staff shall immediately notify his/her chain of command for referral to the appropriate custody supervisor.”

The Auditor interviewed the Health Services Administrator. The HSA stated that they do notify the prisoner of the duty to report sexual abuse allegations and the limitations surrounding confidentiality. She also stated that they have a duty to report all suspicions, knowledge, or information regarding sexual abuse. In addition, the HSA stated that it had been years since she had experienced a situation where a prisoner reported to her about an alleged sexual abuse. The HSA indicated that she immediately notified supervisory staff and was interviewed by an investigator. She also indicated that this incident occurred at a different facility. When interviewing the Mental Health professional, she confirmed the same practices and informed the Auditor that she had experienced a situation where an alleged sexual abuse allegation was made to a subordinate who contacted her, and she notified the Inspector. It should be noted that this question is broad and may expand to one’s entire career and experiences. Therefore, the incident indicated by staff may not have occurred at the MRF and did not occur within this audit period. The question does show a level of knowledge and experience as to how to react in these circumstances.

The evidence collected for this provision shows that the agency has procedures in place to require medical and mental health practitioners to report any incidents they have been made aware of involving the knowledge, suspicion, or information regarding sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (d)

MDOC PREA Manual states in part that; "If the alleged victim is under the age of 18 or considered a vulnerable adult under a state or local vulnerable persons statute, the Department shall report the allegation to the designated state or local services agency under applicable mandatory reporting laws."

When the Warden was interviewed, he stated that the MRF does not house any juveniles. However, they do house vulnerable adults. The Warden indicated that when notified of such a situation where a vulnerable adult alleges being sexually abused, he would immediately make notification to the local Health & Human Services. When interviewing the PREA Coordinator he also confirmed this practice and stated that it's the Warden's responsibility to contact Health & Human Services in the jurisdiction of which the incident occurred.

The evidence collected for this provision shows that the agency has procedures in place to require staff to report sexual abuse involving individuals under the age of 18 and vulnerable adults to the designated state or local services in accordance with applicable mandatory reporting laws. Therefore, through written policy, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.61 Provision (e)

MDOC PREA Manual states in part that; "All prisoner-on-prisoner sexual abuse, staff-on-prisoner sexual misconduct and staff-on-prisoner sexual harassment allegations as described in the definitions of this manual, whether reported verbally, in writing, anonymously or from third parties shall be entered into the Department's computerized investigation database and investigated. A Warden's designee or Administrator's designee will refer to the allegation as soon as possible, but no later than 1 business day after the report was made to the Internal Affairs Division. All prisoner-on-prisoner sexual harassment allegations as described in the definitions of this manual, whether reported verbally, in writing, anonymously or from third parties shall be investigated."

During the document review, the Auditor reviewed 20 investigations. The investigation review revealed that the source of the allegations was: one PREA hotline call, seven verbal allegations reported to staff, one third-party report, ten written reports, and one reported to Internal Affairs. In all 20 cases, to include criminal investigations, a PREA investigator (Facility Investigator) was assigned to conduct the investigation. The Warden was also interviewed and explained that all allegations of sexual abuse and sexual harassment (including third-party reports) are assigned to a PREA trained investigator.

The evidence collected for this provision shows that the agency has procedures in place to ensure that all allegations of sexual abuse are turned over to a PREA designated investigator to initiate an inquiry. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

	<p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring staff and agency reporting duties.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 05.01.140 (Prisoner Placement and Transfer)</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interviews with Random Staff</li> <li>2. Interview with Warden</li> <li>3. Interview with Agency Head/Designee</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.62 Provision (a)</p> <p>MDOC PREA Manual states in part 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. Action may include but is not limited to housing changes, temporary segregation, reassignment, stop orders and transfers. All actions must be documented, including the amount of time between the report and when action was taken, and available for the PREA audit."</p> <p>Interviews were conducted with 12 random staff. Of those staff interviewed, all 12 staff members stated that they would immediately remove the prisoner from the situation, block, or housing unit. In addition, they stated that they would immediately notify a supervisor. The Warden was also interviewed. In that interview, it was stated that the individual must be kept separate, safe, and isolated. He also stated that the alleged abuser would need to be identified and the prisoner victim interviewed. The Agency Head /Designee stated that immediate action would have to take place and the prisoner would be placed in the least restricted appropriate housing necessary</p>

	<p>and the aggressor may be disciplined.</p> <p>The facility reported no instances requiring immediate action to be taken to protect a prisoner from sexual abuse occurring during this rating period.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address when a prisoner is subject to a substantial risk of sexual abuse and immediate action is taken to protect that prisoner. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection duties.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 03.03.140</li> <li>c) Notification email written by a MDOC Warden notifying the MRF Warden about a sexual abuse allegation that allegedly occurred at MRF.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Warden</li> <li>2. Interview with Agency Head/Designee</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.63 Provision (a), (b), and (c)</p> <p>MDOC Policy Directive 03.03.140 states in part that; "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. For allegations of sexual abuse within the MDOC -</p>

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."

MDOC PREA Manual states in part that; "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."

The MRF has reported no instances over the last twelve months where notification was made to another confinement facility about an allegation of sexual abuse. Therefore, no evidence exists regarding any email notifications.

The evidence collected for these provisions shows that the agency has procedures in place to address when an allegation of sexual abuse is received from a prisoner, but the incident occurred at a different confinement facility. Therefore, through written policy and document review the facility has demonstrated that it meets these provisions.

#### 115.63 Provision (d)

MDOC Policy Directive 03.03.140 states in part that; "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."

The MRF reported five instances where they received a sexual abuse allegation from another confinement facility within the last twelve months. The Auditor reviewed 20 sexual abuse and harassment investigations files and reviewed one case file where the investigation was initiated due to a report of sexual abuse that came from an outside confinement facility. When the Warden was interviewed, he stated that all notifications of alleged sexual abuse that occurred at his facility are immediately assigned to an investigator to investigate. If it appears to be criminal in nature, then the MSP is contacted to investigate. The Warden further stated that his facility is responsible for initiating an investigation and provide services if needed. The Agency Head/Designee stated that the point of contact for all sexual abuse allegations between agency's are from agency head to agency head and that they must follow policy and initiate an investigation.

The evidence collected for this provision shows that the agency does have a policy in place to address when an allegation of sexual abuse is received from another agency.

	<p>Also, they have policy in place to govern when and how to handle allegations received by their agency regarding sexual abuse allegations made that occurred at another outside confinement facility. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it does meet this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring the reporting to other confinement facilities and investigating reports from other confinement facilities.</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOCC PREA Manual</li> <li>b) MDOC Sexual Violence Response and Pocket Guide</li> <li>c) Employee PREA Training Course</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Security Staff First Responders</li> <li>2. Interview with prisoners that reported Sexual Abuse</li> <li>3. Interviews Non-Security Staff</li> <li>4. Interviews with Random Staff</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.64 Provision (a)</p> <p>MDOC PREA Manual states in part that; “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:</p> <p>Custody staff shall:</p>

(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.”

The facility also issues all security staff with a Sexual Violence Response and Investigation Pocket Guide that gives guidance and direction as to the responsibilities first responders have when confronted with a sexual abuse allegation.

The facility reported 62 allegations of alleged sexual abuse over the past twelve months. In all 62 cases, security staff were first responders in those incidents. An interview with a security staff first responder was conducted. The first responder was asked to describe the actions taken when first on the scene of an alleged prisoner sexual abuse allegation. The first responder stated that he would make sure the scene was safe, separate the victim and alleged abuser, report to a supervisor, preserve the evidence, notify medical, write a report, and protect the possible crime scene. The Auditor interviewed four alleged prisoner victims that reported sexual abuse. One prisoner reported that he made the allegation about a month after the incident occurred and an investigator came to speak with him. The second prisoner reported the allegation approximately two weeks after the incident and staff came and spoke to him. The third prisoner reported the allegation through the grievance procedure and staff spoke to him quickly. Finally, the last prisoner also used a grievance form to report the incident and indicated that staff spoke to him about a week later. None of these allegations required a medical forensic examination or any other medical treatment. Several were deemed sexual harassment, but all were either offered or received mental health counseling.

The evidence collected for this provision shows that the agency has procedures in place to address the responsibilities of staff first responders when confronted with an allegation of a prisoner sexual abuse. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.64 Provision (b)

MDOC PREA Manual states in part that; “Non-Custody staff shall immediately notify his/her chain of command for a referral to the appropriate custody supervisor and request that the prisoner victim not take any action that could destroy potential physical and/or forensic evidence.”

The facility reported no instances of alleged sexual abuse where the first responder was not a security staff member. When conducting interviews with a volunteer and a contractor they both indicated that they would immediately tell security staff and ensure the prisoner victim was safe and removed from the situation. Both also

	<p>indicated that they would ask the prisoner not to drink, eat, or use the bathroom.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to address the responsibilities of non-security staff first responders when confronted with an allegation of a prisoner sexual abuse. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Staff first responder duties.</p>
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MRF PREA Operating Procedure 03.03.140</li> <li>b) MDOC PREA Manual</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Warden</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.65 Provision (a)</p> <p>MDOC PREA Manual states in part that; “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>The MRF provided policy MRF PREA Operating Procedure 03.03.140 pages 8-11 as their outlined coordinated response plan in the form of a facility operating procedure. This four-page institutional plan found within the policy is used for the facility to follow when confronted with a prisoner sexual abuse incident. The document outlines the procedures/steps to follow and includes the actions of the security first responders, Supervisor’s responsibility, PREA Coordinator’s responsibility, PREA Investigators, and the Warden’s Secretary. However, the coordinated response plan did not address the responsibilities of the Medical or Mental Health staff. The standard</p>

	<p>specifically outlines that a written institutional plan to coordinate actions taken in response to an incident of sexual abuse must include first responders, medical and mental health practitioners, investigators, and facility leadership. In an interview with the Warden, it was confirmed that the facility uses the coordinated response plan found in MRF Operating Procedure 03.03.140 to follow when dealing with incidents of alleged prisoner sexual abuse.</p> <p>During the post-audit phase, the facility has made the necessary changes to policy by adding the needed responsibilities. The Warden signed off on the policy change, making the policy revisions official on June 6th, 2024.</p> <p>The evidence collected for this provision shows that the facility has a coordinated response plan to follow during incidents of alleged prisoner sexual abuse. Therefore, through written policy, and interviews conducted the facility has demonstrated that it does meet this provision.</p> <p>The facility has made the necessary policy changes to the Coordinated Response plan that includes the responsibilities of Medical and Mental Health practitioners in accordance with the Standard. The Warden has signed off on these policy changes and notified affected staff regarding the revision to the facility’s operating procedures.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a coordinated response.</p>
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<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents</p> <p>a) MDOC PREA Manual</p> <p>Interviews:</p> <p>1. Interview with Agency Head / Designee</p> <p>Observations made during the on-site audit and document review.</p>

115.66 Provision (a)

MDOC PREA Manual states in part that; “The Department, or another governmental entity on behalf of the Department:

- Shall not enter into or renew any collective bargaining agreements that limits the Department’s ability to remove alleged staff sexual abusers from contact with prisoners pending the outcome of an investigation.
- Imposes a standard higher than preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.
- Limits the determination of whether and to what extent discipline is warranted.
- 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.
- Prohibits disciplinary sanctions that are not consistent for circumstances that are similarly situated.
- Prohibits referral to law enforcement and relevant licensing bodies, regardless of whether the staff member resigned.”

The Auditor interviewed the Agency Head/Designee and asked if his agency has entered into or renewed any collective bargaining agreements. The Designee confirmed they had with the Michigan Corrections Officers Union. The Designee also confirmed that the agreement permits the agency to remove any alleged staff member from contact with prisoners pending the completion of an investigation.

The evidence collected for this provision shows that neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf has enter into or renew any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any prisoners pending the outcome of an investigation or of a determination of whether, and to what extent, discipline is warranted. Therefore, through policy and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency meets this standard.

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MDOC PREA Manual
- b) MDOC Policy Directive 03.03.140
- c) CAJ-1022 Retaliation Monitoring

Interviews:

1. Interview with Agency Head/Designee
2. Interview with Warden
3. Interview with Staff Member charged with Monitoring Retaliation
4. Prisoners who reported sexual abuse

Observations made during the on-site audit and document review.

115.67 Provision (a)

MDOC PREA Manual states in part that; "Policy Directive 03.03.140 'Prison Rape Elimination Act (PREA) and 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." In addition, MDOC Policy Directive 03.03.140 states that, "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."

The designated staff member charged with monitoring possible retaliation at the MRF is the prison counselor. The facility provided copies of retaliation monitoring forms as evidence in the PAQ, and the Auditor observed these forms when conducting document review while on-site.

The evidence collected for this provision shows that the facility has procedures in place and staff to monitor retaliation associated with reports of sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.67 Provision (b)

MDOC PREA Manual states in part that; "The Department shall act promptly to

remedy any retaliation including employing protection measures such as housing changes, transfers, changes of alleged staff work assignments, and continue such monitoring beyond 90 calendar days if the initial monitoring indicates a need.”

When interviewing the Warden, he explained that they could use multiple ways to protect prisoners or staff from retaliation. The Warden spoke of educating staff and having the MRF PREA Coordinator monitor possible retaliation along with changing housing assignments, transfers, providing mental health treatment, and discipline. The Agency Head/Designee spoke of separation, protective custody, transfers and removing staff. The staff member charged with monitoring retaliation stated that she remains in touch with the prisoner for 90 days and communicates with them in-person. She indicated that she monitors behaviors, problems, anger, and getting tickets. The staff member charged with monitoring retaliation was asked how often they speak with the individuals being monitored. The staff member charged with monitoring retaliation stated once every two weeks. Finally, the staff member charged with monitoring retaliation stated that they would encourage the individuals involved to contact them if they experienced what they believe to be retaliation. The Auditor interviewed four prisoners that reported sexual abuse. When asked if they felt protected enough against possible revenge from staff or other prisoners, three prisoners stated “yes” and one stated “no.”

The evidence collected for this provision shows that the facility employs multiple protection measures for those prisoners and staff who fear retaliation. Therefore, through document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (c)

MDOC PREA Manual states in part that; “Upon receipt of a sexual abuse allegation, staff shall initiate 90 calendar day retaliation monitoring using the appropriate form. If the investigation determines that the allegation is No Evidence/Unfounded, the retaliation monitoring shall discontinue. The form shall be maintained for the PREA Audit. The Department shall monitor for changes that may suggest possible retaliation by prisoners or staff, regardless of if the prisoner is transferred, as follows; 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. Supervisory staff shall monitor disciplinary sanctions, housing/program changes and also conduct periodic status checks.”

The Warden indicated that when he suspects retaliation he would make sure the victim and abusers were separated and refer staff-on-prisoner incidents for investigation. Prisoner-on-prisoner incidents would remain separate and possibly disciplined. The Warden also stated that disciplinary action would result if the investigation findings were substantiated in cases involving staff. Based on the findings of that investigation, staff may be reassigned or receive discipline up to termination. Prisoners can be charged both with in-house charges and criminal prosecution or transferred to a different confinement facility. The staff member

charged with retaliation monitoring stated that they monitor individuals for at least 90 days, or longer if she feels it necessary.

The evidence collected for this provision shows that the facility monitors both staff and prisoners who have alleged sexual abuse or assisted in the investigation for a minimum of 90 days. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (d)

MDOC PREA Manual states in part that; “Supervisory staff shall monitor for disciplinary sanctions, housing/program changes and also conduct periodic status checks.”

When conducting the interview with the staff member responsible for monitoring retaliation she stated that she monitors the situation by checking behavior problems, anger, and receiving tickets from security staff. She also stated that she would meet with the individuals involved face-to-face once every two weeks.

The evidence collected for this provision shows that the facility monitors prisoners for retaliation periodically. Therefore, through policy and interviews conducted the facility has demonstrated that it meets this provision.

#### 115.67 Provision (e)

MDOC PREA Manual states in part that; “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.”

When conducting the interview with the Agency Head/Designee, he stated that they have policies posted to protect those individuals. The names of those involved are not released, the facility conducts retaliation monitoring, and the agency offers employees services. The MRF Warden stated that the facility monitors those situations and that a prisoner engaging in retaliation may be moved to a different housing assignment or to an entirely different facility. He further indicated that if staff were engaged in retaliation, then the staff member would be dealt with using the disciplinary process.

The evidence collected for this provision shows that the facility has procedures in place to address protection for other individuals who cooperate with PREA investigations from retaliation. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.67 Provision (f)

MDOC PREA Manual states in part that; “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.”

	<p>During the interview with the MRF PREA Coordinator, he indicated that the retaliation monitoring would terminate if the investigation determined that the allegation was unfounded.</p> <p>The evidence collected for this provision shows that the facility has procedures in place to address the agency’s obligation to continue monitoring for retaliation if the agency determines the allegation is unfounded. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.</p> <p>Conclusion</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring agency protection from retaliation.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC Policy Directive 04.05.120 (Segregation Standards)</li> <li>c) MRF PREA Coordinator memorandum regarding not receiving any allegations of sexual abuse that warranted immediate action using segregated housing to protect prisoners who alleged to have suffered sexual abuse.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Warden</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.68 Provision (a)</p> <p>MDOC PREA Manual states in part that; “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.”</p>

In addition, MDOC Policy Directive 04.05.120 further states that; “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.”

During this audit period, the facility reported that they had not assigned any prisoner who alleged to have suffered sexual abuse to involuntary segregated housing for the purpose of separating that prisoner due to no other housing alternatives. During the facility tour, the Auditor visited the segregation housing cells that were being utilized and reviewed the cell assignments to verify that no prisoner was being housed involuntarily due to sexual abuse.

The Warden stated during his interview that only in a situation where there were no alternatives would a prisoner be placed in segregated housing due to alleged sexual abuse victimization. He stated that if necessary the alleged perpetrator could be placed in segregated housing. The Warden further indicated if that were the case, the prisoner would be moved within the first 24-hours.

The staff member working in a segregated housing unit was interviewed and indicated that if a prisoner was transferred to the unit due to either being a possible alleged victim, or protection from possible sexual abuse, then they would still have access to privileges such as phone calls, visits, and yard. If they limited access to these programs they would have to document and explain why the opportunities were limited, the duration, and the reason. Finally, the staff member that supervises prisoners in segregation was asked if the facility reviews the prisoner’s situation every thirty days to determine if the housing assignment is still needed. The staff member that supervises prisoners in segregation stated, “Yes, they are seen every seven days.”

The facility provided a memorandum authored by the MRF PREA Coordinator indicating the facility had no instances during this rating period where a prisoner was placed in segregated housing due to being a victim of sexual abuse.

The evidence collected for this provision shows that the agency has procedures in place to ensure that if a prisoner is placed in segregation due to alleging sexual abuse that prisoner would retain all the privileges and opportunities that all other prisoners are afforded. Therefore, through written policy, personal observations, and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring limitation on protective custody.

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <p data-bbox="256 344 1461 412">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 456 432 490">Documents:</p> <ul style="list-style-type: none"> <li data-bbox="256 524 624 557">a) MDOC PREA Manual</li> <li data-bbox="256 591 1086 624">b) MDOC Sexual Violence Response Investigation Guide</li> <li data-bbox="256 658 799 692">c) MDOC Policy Directive 03.03.140</li> <li data-bbox="256 725 1406 759">d) MDOC PREA Manager Memorandum dated 07/15/2022 regarding 115.71(h)</li> <li data-bbox="256 792 1110 826">e) Twenty sexual abuse and sexual harassment case files</li> <li data-bbox="256 860 1015 893">f) MRF NIC PREA Investigations Exceptions Report</li> </ul> <p data-bbox="256 949 416 983">Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="256 1016 663 1050">1. Interview with Warden</li> <li data-bbox="256 1084 815 1117">2. Interview with Investigative Staff</li> <li data-bbox="256 1151 807 1184">3. Interview with PREA Coordinator</li> <li data-bbox="256 1218 935 1252">4. Interview with PREA Compliance Manager</li> </ul> <p data-bbox="256 1308 1198 1341">Observations made during the on-site audit and document review.</p> <p data-bbox="256 1375 544 1408">115.71 Provision (a)</p> <p data-bbox="256 1442 1461 1823">MDOC PREA Manual states in part that; “Where sexual abuse is alleged, an investigator shall be assigned who has received specialized investigator training as outlined in the Training section of this manual. The investigation shall be conducted promptly, thoroughly, and objectively.” The MDOC Policy Directive 03.03.140 also states that; “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="256 1845 1461 2069">The Auditor reviewed 20 investigative files during the document review. The average time it took to initiate an investigation and bring it to completion including criminal investigations across the 20 cases was approximately 159 days. It should be noted that the one case that was criminally investigated by the MSP took 575 days to complete. The files contained both physical and circumstantial evidence, witness,</p>

victim, and alleged abuser interviews amongst other factual documents. During the interview with the investigative staff, the investigator stated that all allegations are forwarded to the Inspector which completes a request for investigation to the Warden, who then assigns an investigator. This usually takes a couple of days. Once the investigator is assigned an administrative investigation is immediately initiated. The investigator stated that anonymous and third-party reports are handled exactly in the same manner as all other sexual abuse allegations.

The evidence collected for this provision shows that the agency has procedures in place to ensure that it investigates sexual abuse allegations promptly, thoroughly, and objectively. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (b)

MDOC PREA Manual states in part that; “Where sexual abuse is alleged, an investigator shall be assigned who has received specialized investigator training as outlined in the Training section of this manual.”

The MRF reported that the facility has 17 PREA certified facility investigators. During the pre-audit phase, the Auditor requested training records for the PREA investigators. The facility provided a MRF NIC PREA Investigations Exceptions Report that listed those staff members that had received both the NIC and MDOC BIT specialized training regarding sexual abuse training in a confinement setting. During the interview process, the MSP supervisor confirmed that she had received the PREA training. The Facility Investigator was also interviewed and indicated that he had attended the MDOC’s Basic Investigator Training about five years ago and took the online course from NIC.

The evidence collected for this provision shows that the agency has procedures in place to ensure that only specially trained sexual abuse investigators conduct investigations into sexual abuse allegations. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (c)

MDOC PREA Manual states in part that; “The facility shall coordinate the actions of the investigators, first responders, law enforcement and forensic examiners to ensure that available direct and circumstantial evidence is gathered and preserved, including any physical DNA evidence and available electronic monitoring data.”

The Auditor reviewed 20 administrative investigation files. Of those investigations, eleven investigations contained physical or circumstantial evidence, witness statements, video footage, victim interviews, and perpetrator interviews. All files contained victim interviews, perpetrator interviews, and witness statements.

When conducting the interview with the MSP supervisor, she stated that usually the facility investigator determines if there is probable cause and notifies the MSP. If the

allegation looked as if it were criminal in nature, an investigative plan would be created and witnesses located. She would then begin answering the questions of who, what, when, where, and how. The Trooper indicated that the facility is responsible for collecting any evidence that needed to be tested or used as evidence. Then she would stop by the facility, pick up the evidence, and take it to the state crime lab. The MSP supervisor also stated that she would take possession of the Perk Kit, Buccal swab, and interview all witnesses.

The evidence collected for this provision shows that the agency has procedures in place to ensure that MDOC investigators collect circumstantial evidence and direct evidence. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (d)

MDOC PREA Manual states in part that; "Investigators shall interview alleged victims, suspected perpetrators, and sufficient witnesses to establish the facts. When the evidence appears to support criminal prosecution, the assigned investigator shall coordinate all investigative interviews with law enforcement to ensure that interviews conducted by the Department, if any, will not be an obstacle for subsequent criminal prosecution."

There are no examples of investigative reports supporting compelled statements. When asked about compelling staff to answer questions, the Facility Investigator explained that they normally contact MSP first and only after the MSP had declined to move forward criminally would the agency consider conducting compelled interviews. The Facility Investigator indicated that he would not conduct compelled interviews and that would be the Internal Affairs decision.

The evidence collected for this provision shows that the agency has procedures in place governing compelled interviews. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (e)

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

The MSP supervisor was interviewed and stated that she treats every allegation the same and handles them in a serious manner. The MSP supervisor also stated that polygraphs are not used to determine truthfulness in allegations of sexual abuse. In addition, the Facility Investigator was asked the same questions and he confirmed that practice. The Auditor's interview with four prisoners that reported sexual abuse responded that they were not required to submit to a polygraph as a condition in continuing with the investigation.

The evidence collected for this provision shows that the agency has procedures in place ensuring that an individual's credibility shall not be determined by the person's status as a prisoner or staff. Furthermore, polygraph examinations will not be used as a condition for proceeding with the investigation of a sexual abuse allegation. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (f)

MDOC PREA Manual states in part that; "Administrative investigations into an allegation of sexual abuse or sexual harassment shall be documented in a written report that conforms to Internal Affairs guidelines and forwarded through the chain of command to the appropriate authority with a courtesy copy to the Department's PREA Section within Central Office. Department investigative reports shall include an effort to determine whether staff actions or inaction contributed to the abuse, a description of the physical, forensic, and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings."

The investigative files examined during the document review phase did contain language as to if MDOC policies and procedures were followed in the incident.

When interviewing the Facility Investigator, he indicated that they would try to determine during the administrative investigation whether staff actions or failure to act contributed to the sexual abuse. The investigator also stated that all administrative investigations are documented and that witness statements, incident reports, circumstantial evidence, audio, and video evidence would be found in an administrative investigation file.

The evidence collected for this provision shows that the agency has procedures in place to ensure efforts are made to determine if staff actions or failures contributed to sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (g)

MDOC PREA Manual states in part that; "Criminal investigations shall be documented in a written report that contains a thorough description of physical, forensic, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. The facility shall request, from the applicable law enforcement agency, a copy of the criminal investigation report to include with the Department's administrative investigation report."

The MSP supervisor confirmed that all criminal investigations shall be documented and that the evidence located in the file would be the same as what is placed in the administrative file.

The evidence collected for this provision shows that the agency conducts all criminal investigations. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (h)

MDOC PREA Manual states in part that; “Upon completion of the administrative investigation and in accordance with policy, the Department shall ensure that all Sufficient Evidence/Substantiated investigations that appear to be criminal are referred for prosecution.”

The MSP supervisor indicated that all criminal cases are referred to the District Attorney’s Office for a decision regarding prosecution unless the investigation was unfounded. The facility has reported that no cases that appear to be criminal were referred for prosecution during this audit period. The MSP supervisor stated that she would refer the case for prosecution at the conclusion of the investigation.

The evidence collected for this provision shows that the agency does conduct criminal investigations and will refer substantiated cases for criminal prosecution. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.71 Provision (i)

MDOC PREA Manual states in part that; “All investigative reports relating to sexual abuse allegations shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five years.”

The evidence collected for this provision shows that the agency has procedures in place to ensure written investigative reports are retained for as long as the alleged abuser is incarcerated or employed by the agency plus five years. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.71 Provision (j)

MDOC PREA Manual states in part that; “The facility shall make its best efforts to avoid transferring prisoners if they are the alleged victim, perpetrator, or a witness in a pending investigation. If a prisoner is transferred prior to completion of the investigation, the facility shall document the rationale for the transfer. A thorough investigation shall be completed even if the alleged abuser departs from Department employment, the victim or perpetrator departs from the control of the facility; or the victim or perpetrator departs from control of the Department.”

The MSP supervisor was asked how she would proceed when a staff member alleged to have committed sexual abuse terminates employment prior to a completed investigation. The investigator explained that she would approach the investigation no differently regardless of if the staff member left employment or if the alleged victim was released from MDOC custody. The Facility Investigator indicated that he would still continue the investigation, and try to make contact, but would still conclude the investigation.

The evidence collected for this provision shows that the agency has procedures in place to ensure that an administrative investigation continues regardless of whether

the abuser or victim is no longer employed or under the agency's control. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

115.71 Provision (I)

MDOC PREA Manual states in part that; "The assigned investigator shall remain informed about the progress of the criminal investigation and disposition.

Documentation of such information shall be recorded in the Department investigative report, PREA investigation worksheet(s), pertinent computerized database entry(ies), and forwarded to the Office of Legal Affairs."

Interviews were conducted with the Warden, PREA Manager, MRF PREA Coordinator, and Investigative Staff about this provision. The PREA Manager, MRF PREA Coordinator, and Warden were asked who investigates criminal allegations of sexual abuse and how would the agency remain informed of the progress of a criminal sexual abuse case. All specialized staff interviewed responded by stating that the MSP conducts all criminal investigations and that the Facility Inspector is the point of contact and is responsible for remaining informed of the progress. The investigator explained that when the MSP is investigating sexual abuse allegations at the MRF then he would assist in any way requested. Usually by escorting, collecting evidence, gathering witness statements, and coordinating interviews.

The evidence collected for this provision shows that the agency has procedures in place to try and stay informed about ongoing criminal sexual abuse investigations amongst their own facilities. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring criminal and administrative agency investigations.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>  The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:  Documents:  a) MDOC PREA Manual  b) MDOC Basic Investigator Training Manual

	<p>Interviews:</p> <p>1. Interview with Investigative Staff</p> <p>Observations made during the on-site audit and document review.</p> <p>115.72 Provision (a)</p> <p>MDOC PREA Manual states in part that; “Preponderance of the evidence shall be the standard in determining whether allegations of sexual abuse or sexual harassment are substantiated. Based upon the preponderance of the evidence, the investigation shall indicate one of the following determinations for each allegation contained within the investigation, substantiated, unsubstantiated, and unfounded.”</p> <p>The Facility Investigator was asked what evidence is required to substantiate allegations of sexual abuse. He stated that for a criminal case probable cause must be present. In an administrative investigation, the preponderance of the evidence or 51% of the evidence suggests one way or the other.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual assault is substantiated. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>The Auditor reviewed 20 administrative investigative files and believes that the documentation of the administrative findings were the proper standard of proof.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring evidentiary administrative investigations.</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) MDOC PREA Manual</p> <p>b) MDOC PREA Policy Directive 03.03.140</p>

c) CAJ-1021 Prisoner Notification of Sexual Abuse Investigative Findings

d) Seven examples of completed CAJ-1021's

Interviews:

1. Interview with Warden
2. Interview with Investigative Staff
3. Interview with Prisoners that reported sexual abuse

Observations made during the on-site audit and document review.

115.73 Provision (a)

MDOC PREA Manual states in part that; "Following investigation of an allegation a prisoner suffered sexual abuse in a facility, the appropriate Warden or Administrator shall ensure the victim is notified in writing as to whether the allegation has been Substantiated/Sufficient Evidence, Unsubstantiated/Insufficient Evidence or Unfounded/No Evidence."

The facility reported 26 investigations of alleged sexual abuse and 25 investigations of alleged sexual harassment during the last twelve months that were completed by the agency. The Auditor reviewed 20 administrative cases where evidence of notification was made and documented in all 20 of those cases.

During the interview with the Facility Investigative staff, the investigator stated that once the investigation has been reviewed a CAJ-1021 form letter comes from the Inspector's Office with the investigative findings is given to the prisoner in all administrative cases and retrieves a signed copy acknowledging receipt of the notification. During the Warden interview, he stated that, "Yes; notification is made to the prisoner as to the findings of the allegation in the form of a CAJ-1021." The Warden also indicated that the investigator usually does the notification. Lastly, of the four prisoners interviewed that reported sexual abuse, all four stated that they never received a letter of notification informing them of the investigative findings. However, the Auditor reviewed one case file that contained a CAJ-1021 notification with the prisoner's signature acknowledging the receipt of the findings. Also, the facility provided examples of seven CAJ-1021 forms at the request of the Auditor during the pre-audit phase. Contained in those files was another CAJ-1021 signed notification that one of the interviewed prisoners alleged not receiving.

The evidence collected for this provision shows that the agency has procedures in place to inform the prisoners who allege sexual abuse of the findings of the investigation. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

Recommendation:

The Auditor is recommending that the facility identify staff members or specific individuals that are familiar with the investigative process responsible for making

notification of sexual abuse finding to the prisoners. In doing so, this allows the prisoner to ask any questions they may have about the process or findings.

#### 115.73 Provision (b)

The MRF is a correctional facility within the Michigan Department of Corrections and relies on the Michigan State Police to conduct all criminal investigations. The MDOC PREA Manual states in part that; "The assigned investigator shall remain informed about the progress of the criminal investigation and disposition." The MRF reported eleven criminal investigations being currently being conducted by the MSP. Of the 20 investigative files reviewed by the Auditor, there were fourteen cases where there is evidence that the cases were referred to the MSP and on what date. There was also evidence, that in all fourteen cases, notification of the investigative findings were present in the case files.

The evidence collected for this provision shows that the agency shall stay informed and request relevant information from the investigative agency in order to inform the prisoner. Therefore, the facility meets this provision of the standard.

#### 115.73 Provision (c)

MDOC PREA Manual states in part that; "Following an allegation that a staff member committed sexual abuse against a prisoner, the facility conducting the investigation shall inform the prisoner, unless the investigation determines the allegation was Unfounded, utilizing a PREA Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Findings and Action Form (CAJ-1021) whenever:

- (1) Any disciplinary action is taken. However, details of the discipline including the specific charges and sanctions shall not be provided.
- (2) The staff member is no longer posted within the prisoner's unit; .
- (3) The staff member is no longer employed at the facility.
- (4) The Department learns the staff member has been indicted on a charge related to sexual abuse within the facility; or
- (5) The Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility."

The four prisoners that alleged sexual abuse, which were present at the time of the on-site facility audit, three involved staff members. One prisoner stated that they have not seen the staff member since making the allegation, one prisoner stated that they see the staff member regularly, and the last prisoner stated that he reported via grievance and the allegation was unfounded.

The evidence collected for this provision shows that the agency has procedures in place to inform alleged prisoner victims when the alleged staff perpetrator's criminal circumstances change due to the sexual abuse allegation. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated

that it meets this provision.

#### 115.73 Provision (d)

MDOC PREA Manual states in part that; "Following allegations that a prisoner was sexually abused by another prisoner, the Department shall subsequently inform the alleged victim utilizing a PREA Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Findings and Action Form (CAJ-1021) whenever:

- (1) The Department learns the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
- (2) The Department learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

All such notifications shall be documented using the appropriate form. If notification is unable to be provided, the attempts shall be documented as well as the rationale for the inability to notify. A copy of the form shall be maintained for the PREA Audit."

The Department's obligation to provide notification as outlined in this section shall terminate if the prisoner is paroled, discharged from his/her sentence, is vacated or the prisoner is pardoned.

The Auditor conducted an interview with one prisoner that reported sexual abuse by another prisoner. This allegation is still being investigated. However, in this incident the alleged aggressor was separated from the alleged victim. This incident did not rise to the level of a criminal charge being pursued for the alleged prisoner aggressor.

The evidence collected for this provision shows that the agency has procedures in place to inform alleged prisoner victims when the alleged prisoner sexual perpetrator's criminal circumstances change due to the sexual abuse allegation. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.73 Provision (e)

MDOC PREA Manual states in part that; "All such notifications shall be documented using the appropriate form. If notification is unable to be provided, the attempts shall be documented as well as the rationale for the inability to notify. A copy of the form shall be maintained for the PREA Audit. The Department's obligation to provide notification as outlined in this section shall terminate if the prisoner is paroled, discharged from his/her sentence, is vacated or the prisoner is pardoned."

The Auditor reviewed 20 administrative investigative files. Of those files, all 20 cases contained documentation of the investigative findings' notification being made to the alleged prisoner victim. In addition, the facility provided seven CAJ-1021 notifications during the pre-audit phase.

The evidence collected for this provision shows that the agency has procedures in

	<p>place to ensure all notifications and attempted notifications are documented. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring reporting to prisoner.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC PREA Policy Directive 03.03.140</li> <li>c) MDOC Employee Handbook</li> <li>d) MDOC Policy Directive 02.03.100 (Employee Discipline)</li> <li>e) MRF PREA Coordinator Memorandum dated 04/02/2024 regarding (no staff has been disciplined or terminated based on PREA policy violations or notifications made to law enforcement and/or relevant licensing bodies).</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.76 Provision (a)</p> <p>MDOC PREA Manual states in part that; “Staff shall be subject to disciplinary sanctions up to and including discharge for violations of Department sexual abuse or sexual harassment policies and work rules in accordance with Policy Directive 02.03.100 ‘Employee Discipline’ and the Employee Handbook. Discharge shall be the presumptive disciplinary sanction for staff who engage in sexual abuse of a prisoner.”</p> <p>The facility provided a memo from the MRF PREA Coordinator regarding no instances where staff was disciplined for violating agency sexual abuse or sexual harassment policies during the audit period.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure staff will be subject to disciplinary actions for violating the agency’s</p>

sexual abuse and sexual harassment policies. Therefore, through written policy the facility has demonstrated that it meets this provision.

#### 115.76 Provision (b)

MDOC PREA Manual states in part that; "Discharge shall be the presumptive disciplinary sanction for staff who engage in sexual abuse of a prisoner."

The MRF provided a written memorandum authored by the MRF PREA Coordinator stating that the facility has not had any staff terminated due to violating the agency's PREA policy during this audit period. There have been no substantiated cases involving staff violating the agency's sexual abuse or sexual harassment policies and no staff has been terminated based on PREA violations during this audit period.

The Auditor reviewed 20 administrative investigative files during the document review. There was no evidence of substantiated allegations involving staff, contractors, volunteers, or any disciplinary sanction associated with employee termination.

The evidence collected for this provision shows that the agency has procedures in place to ensure that termination should be the presumptive disciplinary action for staff who have engaged in sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.76 Provision (c)

MDOC PREA Manual states in part that; "Disciplinary sanctions for sexual harassment and other violations of Department sexual abuse or sexual harassment policies and work rules (other than actually engaging in sexual abuse) shall be commensurate with policy and the nature and circumstances of the acts committed, the staff member's disciplinary history and sanctions imposed for comparable offenses committed by other staff with similar histories."

The facility reported that there have been no staff disciplined for any PREA related allegations associated with sexual abuse or sexual harassment during this audit period. The document review of the administrative files conducted by the Auditor confirmed this statement.

The evidence collected for this provision shows that the agency has procedures in place to discipline staff who violate sexual abuse or sexual harassment policies, but do not engage in sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.76 Provision (d)

MDOC PREA Manual states in part that; "All discharges for sexual abuse or sexual harassment of a prisoner, or resignations by staff who would have been discharged if not for their resignation, shall be reported to law enforcement agencies. Reporting such conduct to other relevant licensing bodies shall take place as deemed appropriate and as required by statute."

	<p>The MRF reported that no staff member has been terminated for PREA policy violations and therefore, no law enforcement agency or licensing bodies were contacted during this audit period. The review of the administrative files by the Auditor confirmed this statement.</p> <p>The evidence collected for this provision shows that the agency has procedures to contact law enforcement and licensing bodies when a staff member is terminated or resigns due to an alleged violation of the agency’s sexual abuse or sexual harassment policies. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring disciplinary sanctions for staff.</p>
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<b>115.77</b>	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC PREA Policy Directive 03.03.140</li> <li>c) Internal Affairs Manager memorandum dated 12/27/2016 (Contractual Employees Investigations)</li> <li>d) MRF PREA Coordinator Memorandum dated 04/02/2024 regarding (no contractor/volunteer has been disciplined or terminated based on PREA policy violations or notifications made to law enforcement and/or relevant licensing bodies).</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with the Warden</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.77 Provision (a)</p> <p>MDOC PREA Manual states in part that; “Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with prisoners and shall be reported to</p>

law enforcement agencies. Reporting such conduct to any other relevant licensing bodies shall take place as deemed appropriate and as required by statute. A contractor may also be subject to termination of the contract with the State.”

The facility provided a memorandum authored by the MRF PREA Coordinator stating that there have been no PREA allegations involving contractors or volunteers violating the agency’s sexual abuse or sexual harassment policies during this audit period. During the file review, the Auditor examined the administrative investigation files and confirmed this statement.

The evidence collected for this provision shows that the agency has procedures in place to ensure volunteers or contractors who engage in sexual abuse do not have contact with prisoners. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

#### 115.77 Provision (b)

MDOC PREA Manual states in part that; “The facility shall take appropriate measures, and shall consider whether to prohibit further contact with prisoners, in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer.”

The facility provided a memorandum from the MRF PREA Coordinator stating that there have been no substantiated cases involving contractors or volunteers violating the agency’s sexual abuse or sexual harassment policies. Also, no volunteer or contractor has been restricted from contact with prisoners based on PREA violations during this audit period.

When the Auditor interviewed the Warden, he indicated that if a contractor or volunteer were accused of violating the agency’s sexual abuse or sexual harassment policy then that individual would be banned from coming to the facility until the investigation was complete. If it were determined that the allegation was substantiated, the contract may be terminated. Based on the job assignment would determine if you separated or discontinue access to the facility.

The evidence collected for this provision shows that the agency has procedures in place to address actions to be taken when a contractor or volunteer violates the agency’s PREA policies but does not engage in sexual abuse of a prisoner. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard.

**Auditor Overall Determination: Meets Standard**

**Auditor Discussion**

The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:

Documents:

- a) MDOC PREA Manual
- b) MDOC Policy Directive 03.03.105 (Prisoner Discipline)
- c) MDOC PREA Policy Directive 03.03.140
- d) MDOC Policy Directive 03.04.100 (Health Services)

Interviews:

- 1. Interview with the Warden
- 2. Medical & Mental Health Staff

Observations made during the on-site audit and document review.

115.78 Provision (a)

MDOC Policy Directive 03.03.140 states in part that; "Prisoners are prohibited from having any sexual contact with another prisoner. A prisoner who willingly engages in such behavior is subject to discipline in accordance with Policy Directive 03.03.105 'Prisoner Discipline' and, as appropriate, reclassification to a higher security level, including segregation, in accordance with Policy Directive 05.01.130 'Prisoner Security Classification' and Policy Directive 04.05.120 'Segregation Standards.'"

The facility has reported that there has been one prisoner-on-prisoner sexual abuse incident at the facility that was substantiated during this audit period. In the investigative file was evidence of the disciplinary hearings that was available to the Auditor.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners are subject to disciplinary sanctions following a finding that the prisoner engaged in prisoner-on-prisoner sexual abuse. Therefore, through written policy and document review the facility has demonstrated that it meets this provision.

115.78 Provision (b) & (c)

MDOC PREA Manual states in part that; "Prisoners shall be subject to disciplinary sanctions in accordance with Policy Directive 03.03.105 'Prisoner Discipline' for engaging in prisoner-on-prisoner sexual abuse. Sanctions imposed upon the prisoner shall be commensurate with the nature and circumstances of the abuse, the

prisoner's disciplinary history, sanctions imposed for comparable offenses and in accordance with policy. A prisoner's mental disabilities or mental illness that may contribute to his/her behavior shall be considered when determining what type of sanction, if any, should be imposed."

When conducting the interview with the Warden, he was asked what disciplinary sanctions prisoners are subject to following an investigation that found the prisoner had engaged in prisoner-on-prisoner sexual abuse. In addition, is mental illness considered when determining sanctions? The Warden stated that the prisoner could be charged in-house and receive 10 days of segregation, loss of privileges, time forfeiture, or level change, but the punishment would be determined on the severity of the violation. The Warden also stated that the mental illness part would be considered on the front end in deciding if the prisoner should be charged in the first place due to his disability.

The evidence collected for these provisions shows that the agency has procedures in place to discipline those prisoners who have been found responsible for engaging in prisoner-on-prisoner sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

#### 115.78 Provision (d)

MDOC PREA Manual states in part that; "If the facility offers therapy, counseling or other interventions designed to address the underlying reasons or motivations for the abuse, the facility mental health care staff shall consider whether to require the offending prisoner to participate in such interventions as a condition of access to programming, etc. In addition, MDOC 03.04.100 further states that; 'Mental health services shall be provided to prisoners in accordance with Policy Directive 04.06.180 'Mental Health Services' and Policy Directive 04.06.183 'Involuntary Treatment of Mentally Ill Prisoners' when any of the following circumstances occur: The prisoner is a reported victim or perpetrator of sexual abuse that occurred while in an institutional setting in accordance with Policy Directive 03.03.140 'Sexual Abuse and Sexual Harassment of Prisoners Prison Rape Elimination Act (PREA).'"

The MRF reported in the Pre-Audit Questionnaire that the facility does provide therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for sexual abuse.

When conducting the interviews with the Medical & Mental Health practitioners, they were asked if the facility offers therapy, counseling, or other intervention services designed to address and correct the underlying reasons for sexual abuse. The HSA stated that it is available through the mental health services. The mental health professional stated that, "Yes, they provide a sexual prisoner treatment program as part of the prisoner's treatment plan." Both health professionals were asked if these services require a prisoner's participation as a condition of accessing programming and other benefits. The HSA stated that she believes it's at the prisoner's discretion. The mental health professional indicated that everyone could choose to participate.

The evidence collected for this provision shows that the agency has procedures in place to provide therapy or counseling designed to address and correct reasons or motivations for sexual abuse. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (e)

The MRF provided the MDOC PREA Manual which states in part that; "In accordance with MCL 750.520c prisoners are unable to consent to sexual contact with MDOC employees, volunteers, or contractors. Therefore, a prisoner may be disciplined for sexual contact with MDOC employees, volunteers, or contractors only after it is determined the employee, volunteer or contractor did not consent to the contact." The facility reported no incidents of this nature during this audit period.

The evidence collected for this provision shows that the agency has procedures in place to discipline those prisoners who have engaged in sexual abuse against staff members. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (f)

MDOC PREA Manual states in part that; "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 a false allegation of sexual abuse that is investigated and determined to be No Evidence/Unfounded, the prisoner may be disciplined in accordance with Policy Directive 03.02.130 'Prisoner/Parolee Grievances,' and Policy Directive 03.03.105 'Prisoner Discipline.'"

The MRF has reported no instances of prisoners making false sexual abuse or sexual harassment allegations where they were disciplined for such action.

The evidence collected for this provision shows that the agency has procedures in place to prohibit those prisoners that report sexual abuse or sexual harassment in good faith be disciplined regardless of the investigative findings. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.78 Provision (g)

MDOC PREA Manual states in part that; "Prisoners are prohibited from having any sexual contact with another prisoner. A prisoner who voluntarily engages in sexual behavior is subject to discipline in accordance with Policy Directive 03.03.105 'Prisoner Discipline.' However, voluntary sexual contact does not fall under the requirement of PREA unless there is evidence to support that the sexual contact is a result of coerced consent or protective pairing defined in this manual."

The evidence collected for this provision shows that the agency has procedures in place to prohibit any type of sexual activity between prisoners and will discipline

	<p>prisoners for those activities. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the agency is fully compliant with this standard requiring disciplinary sanction for prisoners.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC PREA Policy Directive 03.03.140</li> <li>c) MDOC Policy Directive 03.04.108 (Prisoner Health)</li> <li>d) DOC CAJ-1028 Form (Authorization for Release of Information)</li> <li>e) Informed Consent Poster in English &amp; Spanish</li> <li>f) Twelve examples of MDOC Outpatient Mental Health Treatment referrals with follow-up notes</li> <li>g) Four examples of MDOC Outpatient Clinical Encounter medical notes.</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff Responsible for Risk Screening</li> <li>2. Interviews with Medical &amp; Mental Health Staff</li> <li>3. Interviews with Prisoners who disclose Sexual Victimization during Risk Screening</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.81 Provision (a)(c)</p> <p>MDOC PREA Manual states in part that; "If a PREA Risk Assessment or PREA Risk Assessment Review indicates a prisoner has experienced prior sexual victimization,</p>

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.”

The facility reported that 100% of the prisoners that disclosed prior sexual victimization during this audit period while being interviewed during the screening process were provided a follow up meeting with a mental health professional. The Auditor interviewed three prisoners that reported prior sexual victimization. Two prisoners stated they were not asked if they wanted to speak to mental health and one indicated that he did speak with mental health. All three prisoners stated that they see mental health professionals on a regular basis. The facility did provide Outpatient Mental Health Treatment notes that document both the referrals from staff and the follow-up meeting notes. The notes indicate that the prisoner reported prior sexual abuse, the referral chain notifying mental health, and follow-up meeting documentation by the mental health professional well within the 14-day period. During the file review, the Auditor was able to observe where the prisoners had reported and were referred to mental health services for their 14-day follow-up meeting.

When conducting the interview with the staff member who is responsible for risk screening, he stated that if a prisoner discloses prior sexual victimization during the risk screening process, then he immediately fills out a referral form for a 14-day follow-up meeting with mental health.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that report prior sexual victimization are offered a follow-up meeting with medical or mental health professionals within 14 days of intake. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it does meet this provision.

#### 115.81 Provision (b)

MDOC PREA Manual states in part that; “If a PREA Risk Assessment or PREA Risk Assessment Review indicates a prisoner has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure the prisoner is referred for a follow-up meeting with a mental health practitioner within 14 calendar days of the intake screening. If the prisoner accepts the follow-up meeting, staff shall complete a Mental Health Services Referral.”

When conducting the interview with the staff member who is responsible for risk screening, he stated that if a prisoner reports perpetrating prior sexual abuse during the risk screening process, a 14-day follow-up meeting with mental health services would occur. The facility reported no instances during this audit period where any prisoner disclosed perpetrating prior sexual abuse during the screening process. However, while reviewing administrative case files there were two examples of mental health professionals meeting with sexual abuse aggressors after receiving a risk reassessment due to a substantiated findings. The mental health professional was also asked if during a risk screening a prisoner indicates that he has previously perpetrated sexual abuse then is a follow-up meeting offered. The mental health

professional confirmed that it is and usually happens within two days.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that have perpetrated sexual abuse are offered a follow-up meeting with mental health professionals within 14 days of intake. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it does meet this provision.

#### 115.81 Provision (d)

MDOC PREA Manual states in part that; “Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other designated staff as necessary to inform treatment plans and security and management decisions including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.”

The evidence collected for this provision shows that the agency has procedures in place to ensure that reported sexual victimization that occurred in a confinement setting is strictly limited to selected professionals. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.81 Provision (e)

MDOC PREA Manual states in part that; “Medical and mental health care staff shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting. A copy of the prisoner’s informed consent shall be maintained for the PREA audit.”

The medical and mental health professionals were asked if they obtain informed consent from prisoners before reporting about prior sexual victimization. In addition, both were asked how they would handle prisoners under the age of 18 years old. The HSA stated that the MRF doesn’t house juveniles and therefore never experienced that situation. The mental health professional also stated that no juveniles are housed in MRF but did mention that she has a duty to report because of mandatory reporting laws.

The evidence collected for this provision shows that the agency has procedures in place to ensure informed consent is obtained from prisoners before medical and mental health staff can report those incidents if the sexual victimization does not occur in a confinement setting. Therefore, through written policy and interviews conducted the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring a medical and mental health screening, history of sexual abuse.

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) MDOC PREA Policy Directive 03.03.140</li> <li>c) MDOC Policy Directive 03.04.100 (Health Services)</li> <li>d) MDOC Policy Directive 03.04.125 (Medical Emergencies)</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Staff Responsible for Risk Screening</li> <li>2. Interviews with Medical &amp; Mental Health Staff</li> <li>3. Interview with Staff First Responder</li> </ul> <p>Observations made during the on-site audit and document review.</p> <p>115.82 Provision (a)</p> <p>MDOC PREA Manual states in part that; “In accordance with Policy Directive 03.04.125 ‘Medical Emergencies’ and Policy Directive 04.06.180 ‘Mental Health Services,’ prisoner victims of sexual abuse shall receive timely emergency medical treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health staff.”</p> <p>The medical and mental health professionals were interviewed and asked if prisoner victims of sexual abuse receive immediate and unimpeded emergency medical care and both professionals answered that they do. In addition, the HSA stated that the nature and scope of the treatment is at the discretion of the attending physician at the emergency room. However, the HSA’s responsibility is the continuity of care and follow all the physician’s orders. The mental health professional stated that she determines the level of care required and that there is always mental health staff on call. Therefore, mental health services are available if needed in emergency situations.</p> <p>The four prisoners interviewed that reported sexual abuse was asked if medical or mental health services were offered at the time of the sexual abuse allegation. Three prisoners indicated that they were offered medical and mental health services and one stated that he was not.</p>

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that report prior sexual victimization 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. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

115.82 Provision (b)

MDOC PREA Manual states in part that; "If no qualified medical or mental health staff are on duty at the time an allegation of recent abuse is made, custody staff first responders shall take preliminary steps to protect the victim in accordance with the Protective Custody section of this manual and shall immediately provide notification to the appropriate medical and mental health staff."

When the Auditor spoke with the MRF PREA Coordinator, he advised the Auditor that nursing staff is assigned to the facility 24-hours a day/seven days a week. Therefore, medical attention is always available at the MRF.

Interviews were conducted with 12 random staff and of those staff interviewed; all 12 staff members stated that they would immediately remove the prisoner from the situation, block, or housing unit. When interviewing a first responder he explained that he would make the scene safe, report to a supervisor, preserve evidence, contact medical personnel, write a report, and protect the crime scene.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that report sexual abuse are offered immediate medical and mental health services when no qualified medical and mental health personnel is available. Therefore, through policy and interviews conducted the facility has demonstrated that it meets this provision.

115.82 Provision (c)

MDOC PREA Manual states in part that; "Prisoner victims of sexual abuse while incarcerated shall be offered information about and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with Department Operating Procedure 03.04.100H 'Health Care Management of Reported Sexual Assaults of Prisoners in CFA Facilities' as noted in the Ongoing Victim Services section of this manual."

The MRF utilizes the services provided by Turning Point Rape Crisis Center Forensics Unit to provide these services. The interview with the Turning Point Supervisor specifically outlined that the SANE Nurse would offer information, timely access to emergency contraception, and sexually transmitted infections prophylaxis. In addition, MDOC Clinical Encounter notes indicated that several prisoners that alleged prior sexual abuse requesting testing and medical staff providing those tests.

When conducting interviews with medical and mental health staff it was indicated

	<p>that, “Yes, the SANE Nurse employed by Turning Point would offer those services.”</p> <p>During the interviews with the four prisoners that reported sexual abuse, none were taken to the hospital to receive any testing or medication given their allegations. However, the MRF did have an incident that required a medical forensic examination and provided a copy of the Sexual Assault Assessment as evidence of the examination being completed.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners are offered information and access to emergency contraception and sexually transmitted infections prophylaxis after allegations of sexual abuse. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p>115.82 Provision (d)</p> <p>MDOC PREA Manual states in part that; “Treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation of the incident.”</p> <p>The prisoners interviewed who reported sexual abuse were not taken outside the facility for any treatment and therefore did not incur any financial cost associated with their allegations.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that report sexual abuse do not incur any financial responsibility due to a sexual abuse allegation. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring access to emergency medical and mental health services.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <p>a) MDOC PREA Manual</p>

b) MDOC Policy Directive 03.04.100 (Health Services)

Interviews:

1. Interviews with Medical & Mental Health Staff
2. Interview with Prisoner who reported a Sexual Abuse

Observations made during the on-site audit and document review.

115.83 Provision (a) & (b)

MDOC PREA Manual states in part that; “The facility shall offer medical and mental health evaluation and, as appropriate, all treatment that is determined to be medically necessary and consistent with the community level of care, to prisoners who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility.”

The interviews conducted revealed that medical staff would not take the lead on treatment and would consult with the SANE Nurse or an attending physician. The HSA stated that the treatment should be individualized based on the type of injury, and that the nurse and attending doctor would determine that, and their job is the continuity of care. The mental health professional stated that appointments would be made, and if the prisoner was released, arrangements could be made through deferred parole or needs assessment to complete their plan.

When interviewing those prisoners that reported sexual abuse, they were not asked about follow-up services, treatment plans, or referrals for continued care because it was deemed their allegations of sexual abuse did not rise to that level of services.

The evidence collected for this provision shows that the agency has procedures in place to ensure the facility offer medical and mental health evaluation and treatment to all prisoners who have been sexually victimized. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets these provisions.

115.83 Provision (c)

MDOC PREA Manual states in part that; “The facility shall offer medical and mental health evaluation and, as appropriate, all treatment that is determined to be medically necessary and consistent with the community level of care, to prisoners who have been victimized by sexual abuse in any prison, jail, lockup or juvenile facility.”

MDOC employs medical professionals that must be licensed and registered to practice in the state of Michigan. These licenses must be maintained to continue employment. The mental health professionals are employed by the Michigan Department of Corrections. For the purpose of this standard, the agency mental health professional also stated that, “Yes, the services offered are consistent with those in the community.” Both the medical and mental health services provided by the MRF are

consistent with the community level of care.

An interview was conducted with both the medical & mental health staff. Both interviews revealed that they believe that the medical service is consistent with those of the community.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners receive medical and mental health services consistent with the community level of care. Therefore, through interviews conducted the facility has demonstrated that it meets this provision.

#### 115.83 Provision (d) & (e)

MDOC PREA Manual states in part that; "Prisoner victims of sexually abusive vaginal penetration while incarcerated shall be offered a pregnancy test. If the pregnancy test is positive, the victim shall receive timely and comprehensive information and access to all lawful pregnancy-related medical services."

When conducting an interview with the HSA, she replied that the MRF is an all-male facility. In addition, the HSA indicated that, "Yes, a positive pregnancy result from a prisoner female victim would receive timely information about access to all lawful pregnancy related services and those services would be provided as soon as possible."

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that are victims of vaginal penetration are offered pregnancy tests along with timely information about access to all lawful pregnancy-related medical services. However, the MRF is an all-male facility. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that this provision is not applicable.

#### 115.83 Provisions (f) & (g)

MDOC PREA Manual states in part that; "Prisoner victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections/diseases as deemed medically appropriate. Treatment services shall be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."

The Auditor interviewed four prisoners that reported sexual abuse. All prisoners reported that they were not transported to a hospital where they would have received testing for sexually transmitted infections due to the alleged incident. All four prisoners indicated that there was no financial cost to them related to any services provided.

The evidence collected for this provision shows that the agency has procedures in place to ensure that prisoners that are victims of sexual abuse are offered tests for sexually transmitted infections as appropriate. Therefore, through written policy, the facility has demonstrated that it meets this provision.

	<p>115.83 Provision (h)</p> <p>MDOC PREA Manual states in part that; “Within 60 calendar days of learning of a known prisoner-on-prisoner abuser, mental health staff shall attempt to conduct a mental health evaluation of the abuser’s history and offer treatment as deemed appropriate.”</p> <p>During the interview with the mental health professional, she was asked if they would conduct an interview with all prisoner-on-prisoner abusers, offer treatment if appropriate, and when would these interviews be conducted. The mental health professional indicated that, “Yes, interviews would be conducted once they received a referral, the prisoner would be seen within 24-hours.” The HSA was interviewed and stated that this responsibility would fall on the mental health staff.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to attempt to conduct a mental health evaluation of all known prisoner-on-prisoner abusers within 60 days of learning such abuse history. Therefore, through written policy the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring ongoing medical and mental health care for sexual abuse victims and abusers.</p>
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<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) CAJ-1025 form (Sexual Abuse Incident Review)</li> <li>c) MDOC PREA Policy Directive 03.03.140</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with the Warden</li> <li>2. Interview with the PREA Coordinator</li> <li>3. Interview with the Incident Review Team Member</li> </ul>

Observations made during the on-site audit and document review.

115.86 Provision (a) & (b)

MDOC PREA Manual states in part 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. Such a review shall generally occur within 30 calendar days after the conclusion of the investigation.”

The MRF has reported 24 incidents of prisoner sexual abuse requiring an Incident Review at the time of completing the PAQ. The facility has provided copies of Sexual Abuse Incident Reviews in the form of CAJ-1025 forms. The forms list who was in attendance, the date the review took place, summary of the incident, review of the considerations and factors, and any proposed action plan. In addition, the Auditor reviewed twenty investigative files, and of those files that were reviewed, fifteen contained evidence of the incident reviews being completed. Out of those fifteen files, one file showed the review occurred outside the 30-day time period.

The evidence collected for these provisions shows that the agency has procedures in place to ensure that an incident review is conducted after every sexual abuse investigation excluding those that are unfounded. In addition, the incident review shall occur within 30 days of the conclusion of the investigation. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.86 Provision (c)

MDOC PREA Manual states in part that; “The review team shall include upper-level custody and administrative staff, with input from relevant supervisory staff, investigators, and medical or mental health practitioners or others as appropriate.”

The fifteen PREA Incident Review documents examined by the Auditor listed multiple occupational authorities such as the Deputy Warden, MRF PREA Coordinator, Facility Investigator, and psychologist.

In the interview with the Warden, he was asked who is part of the sexual abuse incident review team? The Warden stated that the team is made up of the PREA Coordinator, Investigator, Mental Health staff, Health Care staff, Inspector, and leadership.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the review team is made up of upper-level management, supervisors, investigators, and medical/mental health staff. Therefore, through written policy, document review, and interviews conducted the facility has demonstrated that it meets this provision.

115.86 Provision (d) & (e)

MDOC PREA Manual states in part that; “The review team shall:

(1) Consider whether the allegation or investigation indicates a need to change policy or practice to prevent, detect or respond to sexual abuse.

(2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.

(3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.

(4) Assess the adequacy of staffing levels in that area during different shifts.

(5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and

(6) Prepare a report of its findings including but not necessarily limited to determinations made pursuant to (1) through (5) and any recommendations for improvement and submit such report to the Warden or Administrator with a courtesy copy to the Department's PREA Section within Central Office and facility PREA Coordinator."

"The Warden shall review and forward through the chain of command to the Deputy Director (CFA) or designee for consideration of recommendations for improvement. If the recommendations are not implemented, the rationale for not doing so shall be documented on the PREA Sexual Abuse Incident Review form."

The Sexual Abuse Incident Review document CAJ-1025 that was reviewed by the Auditor has those factors listed on the form to specifically discuss. In addition, the files reviewed by the Auditor contained a dedicated space to make recommendations. However, the CAJ-1025 forms the Auditor reviewed did not make any recommendations.

Interviews with the Warden, Incident Review Team Member, and MRF PREA Coordinator all revealed that these topics are considered and discussed during the review. The facility forwards all incident review documentation to the Deputy Director for review.

The evidence collected for this provision shows that the agency has procedures in place to ensure that the incident review team considers all the above-listed criteria when convening their meetings. Therefore, through written policy, and interviews conducted, the facility has demonstrated that it meets this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring sexual abuse incident reviews.

<b>115.87</b>	<b>Data collection</b>
	<p data-bbox="256 188 959 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 544 300"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1461 416">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 456 432 492">Documents:</p> <ul style="list-style-type: none"> <li data-bbox="256 528 624 564">a) MDOC PREA Manual</li> <li data-bbox="256 600 895 636">b) MDOC PREA Annual Reports 2018-2022</li> <li data-bbox="256 672 991 707">c) Bureau of Justice Statistics Survey 2017- 2020</li> </ul> <p data-bbox="256 743 416 779">Interviews:</p> <p data-bbox="256 815 1198 851">Observations made during the on-site audit and document review.</p> <p data-bbox="256 887 544 922">115.87 Provision (a)</p> <p data-bbox="256 958 1477 1245">MDOC PREA Manual states in part that; “Each allegation of sexual abuse reported to have occurred within Department facilities shall be entered into the appropriate MDOC computerized database. The Department PREA Manager gathers data on each reported incident to aggregate an annual incident report. The report will include, at a minimum, the data necessary to complete the annual Department of Justice Survey on Sexual Violence. The Department shall provide all data to the U.S. Department of Justice from the previous calendar year upon request no later than June 30.”</p> <p data-bbox="256 1281 1461 1442">The facility has provided the last three years’ worth of PREA aggregated data in their PREA annual reports and three years’ worth of Bureau of Justice Statistics surveys. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress.</p> <p data-bbox="256 1478 1477 1684">The evidence collected for this provision shows that the agency has procedures in place to collect accurate uniform data for every allegation of sexual abuse. The data collected is used to complete the federal mandated Survey of Sexual Violence questionnaire. Therefore, through written policy and document review, the facility has demonstrated that it meets these provisions.</p> <p data-bbox="256 1720 544 1756">115.87 Provision (b)</p> <p data-bbox="256 1792 1477 1868">MDOC PREA Manual states in part that; “The Department PREA Manager gathers data on each reported incident to aggregate an annual incident report.”</p> <p data-bbox="256 1904 1461 2065">The facility has provided the last three years’ worth of PREA aggregated data in their annual reports. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress.</p>

The evidence collected for this provision shows that the agency has procedures in place to ensure that the facility will aggregate the incident based sexual abuse data annually. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.87 Provision (c)

MDOC PREA Manual states in part that; “The report will include, at a minimum, the data necessary to complete the annual Department of Justice Survey on Sexual Violence. The Department shall provide all data to the U.S. Department of Justice from the previous calendar year upon request no later than June 30.”

The facility has provided three years’ worth of PREA aggregated data in their BJS Survey of Sexual Victimization forms provided to the Department of Justice.

The evidence collected for this provision shows that the agency has procedures in place to collect accurate uniform data for every allegation of sexual abuse. The data collected is used to complete the federal mandated Survey of Sexual Violence questionnaire. Therefore, through written policy and document review, the facility has demonstrated that it meets these provisions.

115.87 Provision (d)

MDOC PREA Manual states in part that; “Each allegation of sexual abuse reported to have occurred within Department facilities shall be entered into the appropriate MDOC computerized database.”

The evidence collected for this provision shows that the agency has procedures in place to maintain, review, and collect data needed from all incident-based documents. The agency then collects all the data from each correctional facility in order to develop the agency’s annual report. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

115.87 Provision (e)

MDOC PREA Manual states in part that; “The department PREA Manager also shall request data on each reported incident from every private facility contracted for the confinement of offenders when applicable.”

The facility has provided the last three years’ worth of PREA aggregated data in their annual reports. The 2022 PREA annual report contains comparisons of the current year’s data and corrective actions from the previous years’ assessment of the agency’s progress. In addition, the facility has provided copies of their agency’s three years’ worth of BJS Survey of Sexual Victimization forms provided to the Department of Justice. The agency collects all the data from each correctional facility in order to develop the agency’s annual report. This includes the Eaton County Sheriff’s Office which is the only correctional facility that is privately contracted to hold DOC prisoners in the state of Michigan.

The evidence collected for this provision shows that the agency has procedures in

	<p>place to obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its prisoners. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>115.87 Provision (f)</p> <p>MDOC PREA Manual states in part that; “The Department shall provide all data to the U.S. Department of Justice from the previous calendar year upon request no later than June 30.”</p> <p>The facility has provided copies of their agency’s three years’ worth of BJS Survey of Sexual Victimization forms provided to the Department of Justice.</p> <p>The evidence collected for this provision shows that the agency has procedures in place to submit their annual SSV report to the Department of Justice. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Data Collection.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p>Documents:</p> <ul style="list-style-type: none"> <li>a) MDOC PREA Manual</li> <li>b) Copies of the MDOC 2020 thru 2022 PREA Annual Reports</li> <li>c) The MDOC Official Website</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>1. Interview with Agency Head/Designee</li> <li>2. Interview with PREA Coordinator</li> <li>3. Interview with PREA Compliance Manager</li> </ul>

Observations made during the on-site audit and document review.

#### 115.88 Provision (a)

MDOC PREA Manual states in part that; “The Department’s PREA Section will review data regarding reported sexual abuse within Department facilities in order to assess and improve the effectiveness of sexual abuse prevention, detection and response and pertinent policies, practices, and training. Incidents will be reviewed in an effort to identify:

(1) Problem areas

(2) Recommend facility-specific and/or department-wide action to augment current practices on an ongoing basis, and

(3) Prepare an annual report of findings and recommendations.”

The facility has provided the last three years of their PREA Annual Reports as evidence to support compliance with this provision. The reports include all the above elements outlined in this provision, specifically, under the corrective action and summary comparison portions of the annual reports.

Interviews conducted with the Agency Head/Designee and PREA Manager confirmed that an annual report is generated to assess and improve the effectiveness of the agency’s prevention, detection, and response to sexual abuse. The MRF PREA Coordinator stated that the report is used for recommendations and corrective action. He stated that the Warden receives the Annual Review but not sure what that entails.

The evidence collected for this provision shows that the agency has procedures in place to review data collected to better assess and improve the effectiveness of its sexual abuse policies. Therefore, through written reports, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.88 Provision (b)

MDOC PREA Manual states in part that; “Included in the report will be a comparison with results from the previous annual reviews to assess the Department’s progress in addressing sexual abuse over time.”

The MDOC PREA Annual reports are compared by total allegations, allegations by type, and findings. This includes a comparison of the current year’s data and corrective actions with those from prior years and provides an assessment of the agency’s progress in addressing sexual abuse. The 2022 MDOC PREA Annual Report makes comparisons for Prisoner-on-Prisoner Allegations of Sexual Abuse from 2021 to 2020 and Staff-on-Prisoner Sexual Misconduct from 2021 to 2022.

The facility has provided the last three years’ worth of PREA annual reports containing comparisons of the current year’s data and corrective actions from the previous year’s assessment of the agency’s progress.

The evidence collected for this provision shows that the agency has procedures in

place to ensure that the facilities provide prior year comparisons in its yearly PREA annual report. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.

#### 115.88 Provision (c)

MDOC PREA Manual states in part that; “Only with the Director’s approval will the report be placed on the MDOC website. Prior to placing it on the website, information that would present a clear and present threat to the safety and security of any facility that would jeopardize any litigation or contains confidential information shall be redacted. If information is redacted, an explanation of the nature of the material redacted will be included.”

The facility has posted the last nine years of sexual safety statistics in their PREA Annual Reports located on their website. This is a public website that provides access to those reports. When interviewing the Agency Head/Designee, he stated that, “Yes, he the Director approves all PREA Annual Reports before being published on the agency website.” The annual reports are signed by both the PREA Manager and the Director of MDOC.

The evidence collected for this provision shows that the agency has procedures in place to make the PREA Annual Report public by posting it to their website and that the Director must have final approval. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### 115.88 Provision (d)

MDOC PREA Manual states in part that; “Prior to placing it on the website, information that would present a clear and present threat to the safety and security of any facility that would jeopardize any litigation or contains confidential information shall be redacted. If information is redacted, an explanation of the nature of the material redacted will be included.”

The facility reported that the only information redacted from the annual reports are the names of the individuals involved and that there has been no material redacted. The PREA Coordinator stated during his interview that only personal identifiers and threats to safety and security would be the only reasons to redact information from the PREA Annual Report.

The evidence collected for this provision shows that the agency has procedures in place to redact only specific information from the PREA Annual Report. Therefore, through written policy, document review, and interviews conducted, the facility has demonstrated that it meets this provision.

#### Conclusion:

Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring Data Review for corrective action.

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<p data-bbox="256 188 959 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 544 300"><b>Auditor Discussion</b></p> <p data-bbox="256 344 1458 412">The PREA Auditor gathered, analyzed, and retained the following evidence related to this standard:</p> <p data-bbox="256 456 432 490">Documents:</p> <ul style="list-style-type: none"> <li data-bbox="256 524 624 557">a) MDOC PREA Manual</li> <li data-bbox="256 591 884 624">b) MDOC 2020-2022 PREA Annual Report</li> <li data-bbox="256 658 719 692">c) The MDOC Official Website</li> </ul> <p data-bbox="256 736 416 770">Interviews:</p> <ul style="list-style-type: none"> <li data-bbox="256 815 804 848">1. Interview with PREA Coordinator</li> </ul> <p data-bbox="256 882 1198 916">Observations made during the on-site audit and document review.</p> <p data-bbox="256 949 544 983">115.89 Provision (a)</p> <p data-bbox="256 1016 1458 1095">MDOC PREA Manual states in part that; “The Department shall ensure that all sexual abuse and sexual harassment data collected is securely retained.”</p> <p data-bbox="256 1128 1474 1386">The PREA Manager was interviewed and asked how the agency ensures that the data collected is securely retained. The PREA Manager stated that all PREA-related information is stored in a secure database called AIM management system. This system is used to store information related to all incidents. Access to this information is on a need-to-know basis. He also stated that the permissions are limited to your job description.</p> <p data-bbox="256 1420 1474 1576">The evidence collected for this provision shows that the agency has a procedure in place to secure collected data regarding sexual abuse allegations. Therefore, through written policy and interviews conducted, the facility has demonstrated that it meets this provision.</p> <p data-bbox="256 1621 608 1655">115.89 Provision (b) &amp;(c)</p> <p data-bbox="256 1688 1442 1890">MDOC PREA Manual states in part that; “The Department shall make all aggregated sexual abuse data as outlined in the data collection section of this manual readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.”</p> <p data-bbox="256 1924 1474 2047">The agency has posted the PREA Annual Reports from 2014 through 2022 on their website. This is a public website that provides access to this report. This report can be viewed by going to the agency’s website.</p>

	<p>The evidence collected for this provision shows that the agency has procedures in place to make the PREA Annual Report public by posting it to their website and that all personal identifiers are redacted prior to publication. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>115.89 Provision (d)</p> <p>MDOC PREA Manual states in part that; “The Department shall maintain sexual abuse data collected pursuant to the data collection section of this manual for at least 10 years after the date of the initial collection.”</p> <p>The evidence collected for this provision shows that the agency has procedures in place to ensure sexual abuse data is retained for at least 10 years after the date of the initial collection. Therefore, through written policy and document review, the facility has demonstrated that it meets this provision.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the PREA Auditor has determined that the facility is fully compliant with this standard requiring data storage, publication, and destruction.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>PREA Standard 115.401 Frequency and Scope of Audits</p> <p>Provisions (a)(b)(h)(i)(m)(n)</p> <p>This is Macomb Correctional Facility’s second PREA Audit. The results of the initial audit was that the facility met 44 PREA standards, exceeded 1 standard, and 0 standards were not applicable. Each facility under the direct control of the Michigan Department of Corrections has been audited at least once during the previous three-year audit cycle, excluding the COVID pandemic. During the previous three-year audit cycle, the Michigan Department of Corrections ensured that at least one-third of its facilities were audited each year.</p> <p>The Auditor was given full access to and observed all areas of the facility without obstruction. The Auditor received all requested documents or copies of relevant materials. The Auditor was also permitted to conduct all interviews in a private setting with both prisoners and staff. Finally, the prisoners were permitted to send the Auditor confidential correspondence in the same manner that legal mail would be handled. This topic was discussed and documented prior to the audit. The Auditor did receive five prisoner correspondences during this PREA audit, and the</p>

	Auditor interviewed all the prisoners that wrote those correspondences while conducting the on-site portion of the audit.
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>PREA Standard 115.403 Audit Contents and Findings</p> <p>Provision (f)</p> <p>The Macomb Correctional Facility, which is a correctional facility, operated by the Michigan Department of Corrections has posted the facility's previous PREA Auditor's Summary report on their agency website. The agency publishes all facility PREA audits on their website and schedules one-third of their facilities to be PREA audited every three years. Therefore, evidence would suggest that this would happen once again after receiving the 2024 PREA audit final report for the Macomb Correctional Facility.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	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
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	yes

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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	yes

	facility does not have female inmates.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	

	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
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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.)	na
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	

	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
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.31 (a)</b>	<b>Employee training</b>	
	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
<b>115.31 (b)</b>	<b>Employee training</b>	
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	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
<b>115.33 (b)</b>	<b>Inmate education</b>	
	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
<b>115.33 (c)</b>	<b>Inmate education</b>	
	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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.35 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.41 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.41 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective	yes

	screening instrument?	
<b>115.41 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
<b>115.42 (a)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
<b>115.42 (d)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (e)</b>	<b>Use of screening information</b>	
	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
<b>115.42 (f)</b>	<b>Use of screening information</b>	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
<b>115.42 (g)</b>	<b>Use of screening information</b>	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	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
<b>115.43 (d) Protective Custody</b>		
	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
<b>115.43 (e) Protective Custody</b>		
	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
<b>115.51 (a) Inmate reporting</b>		
	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
<b>115.51 (b) Inmate reporting</b>		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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	na

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	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
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	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
<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	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
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	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
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	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
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	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
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	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
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.67 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	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
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.71 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.72 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.73 (a)</b>	<b>Reporting to inmates</b>	
	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

<b>115.73 (b)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	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
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.76 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.76 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.76 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.76 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.77 (a)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.77 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	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
<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	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
<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	na
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	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
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse</b>	

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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

<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

<b>115.87 (a)</b>	<b>Data collection</b>	
	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
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	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
<b>115.87 (d)</b>	<b>Data collection</b>	
	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
<b>115.87 (e)</b>	<b>Data collection</b>	
	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
<b>115.87 (f)</b>	<b>Data collection</b>	
	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
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	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
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

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

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