

# PREA Facility Audit Report: Final

**Name of Facility:** Women's Huron Valley Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 06/02/2025

**Date Final Report Submitted:** 08/12/2025

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> Matthew Taylor	<b>Date of Signature:</b> 08/12/2025

AUDITOR INFORMATION	
<b>Auditor name:</b>	Taylor, Matthew
<b>Email:</b>	matthew@preaauditing.com
<b>Start Date of On-Site Audit:</b>	03/24/2025
<b>End Date of On-Site Audit:</b>	03/26/2025

FACILITY INFORMATION	
<b>Facility name:</b>	Women's Huron Valley Correctional Facility
<b>Facility physical address:</b>	3201 Bemis Road, Ypsilanti, Michigan - 48197
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Shaheeah Hardwick
<b>Email Address:</b>	HardwickS@michigan.gov
<b>Telephone Number:</b>	734 572-9785

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Jeremy Howard
<b>Email Address:</b>	HowardJ15@michigan.gov
<b>Telephone Number:</b>	734 572-9394

<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>	Jacqueline Jones
<b>Email Address:</b>	Jacqueline Jones
<b>Telephone Number:</b>	734 434-1095

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1985
<b>Current population of facility:</b>	1797
<b>Average daily population for the past 12 months:</b>	1775
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Women/girls

<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	86y10m - 19y10m
<b>Facility security levels/inmate custody levels:</b>	I, II, IV, Seg
<b>Does the facility hold youthful inmates?</b>	Yes
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	463
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	0
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	396

## 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

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Charles Carlson	<b>Email Address:</b>	carlsonc2@michigan.gov

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

## POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-03-24
2. End date of the onsite portion of the audit:	2025-03-26

#### 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 attempted to communicate with Just Detention International and Michigan Women Forward of Huron Valley.

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1985
15. Average daily population for the past 12 months:	1775
16. Number of inmate/resident/detainee housing units:	32
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input 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>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1795
<b>24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>25. 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>	246
<b>26. 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>	253
<b>27. 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>	5
<b>28. 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>	197
<b>29. 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>	2

<p><b>30. 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></p>	<p>44</p>
<p><b>31. 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>44</p>
<p><b>32. 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>313</p>
<p><b>33. 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>149</p>
<p><b>34. 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>2</p>
<p><b>35. 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>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>36. 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>463</p>

<b>37. 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>	396
<b>38. 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>	227
<b>39. 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>	No text provided.

## INTERVIEWS

### Inmate/Resident/Detainee Interviews

#### Random Inmate/Resident/Detainee Interviews

<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	20
<b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None
<b>If "Other," describe:</b>	Custody Level

<p><b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>The audit team received a copy of the facility roster which broke down the population by age, race, ethnicity, length of time in the facility and custody level. This information allowed the auditor to accurately select a random representation of the inmate population from the facility.</p>
<p><b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>44. 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>No text provided.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>22</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>46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful 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/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/detainees.</p> <p><input type="checkbox"/> The inmates/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/detainees).</b></p>	<p>The facility reported there were no youthful inmates during the onsite portion of the audit. The audit team was able to confirm this information through review of inmate rosters, observations during site review process and interviews conducted with staff at the facility.</p>
<p><b>47. 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>1</p>
<p><b>48. 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>2</p>
<p><b>49. 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>1</p>
<p><b>50. 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>2</p>

<b>51. 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>	2
<b>52. 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>	3
<b>53. 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>54. 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>	5
<b>55. 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>56. 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>	0

<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 there were no inmates that were placed in segregated housing for risk of sexual victimization during the onsite portion of the audit. The audit team was able to confirm this information through review of inmate rosters, observations during site review process and interviews conducted with staff at the facility.</p>
<p><b>57. 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>No text provided.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>58. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>12</p>
<p><b>59. 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 checked="" type="checkbox"/> Work assignment</p> <p><input checked="" 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 audit team attempted to interview both male and female staff working at the facility.</p>

<b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. 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>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	12
<b>63. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>65. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>66. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**67. 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>68. 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>	2
<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 type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>69. 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>	2
<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 checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>70. 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.

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

Yes

No

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

**72. 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

**73. 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

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

Yes

No

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

Yes

No

<p><b>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>No text provided.</p>
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**Documentation Sampling**

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

<p><b>77. 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?</b></p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p><b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>
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**SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY**

**Sexual Abuse and Sexual Harassment Allegations and Investigations Overview**

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

**79. 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>	293	32	333	32
<b>Staff-on-inmate sexual abuse</b>	23	1	15	1
<b>Total</b>	328	33	348	33

**80. 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>	231	0	210	0
<b>Staff-on-inmate sexual harassment</b>	18	0	29	0
<b>Total</b>	249	0	239	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.

#### 81. 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>	x	x	x	x	x
<b>Staff-on-inmate sexual abuse</b>	x	x	x	x	x
<b>Total</b>	x	x	x	x	x

**You indicated that you are unable to provide information for one or more of the fields above. Explain why this information could not be provided.**

The agency and the facility utilizes the Michigan State Police to conduct criminal sexual abuse investigations. Although they have a written agreement between the two agencies that provides guidance on referring for criminal investigation, the facility reported that this information was not available to the.

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	13	2	270	3
<b>Staff-on-inmate sexual abuse</b>	2	1	14	1
<b>Total</b>	15	3	284	4

**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.

**83. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	13	2	188	1
<b>Staff-on-inmate sexual harassment</b>	2	3	12	0
<b>Total</b>	15	5	200	1

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review****Sexual Abuse Investigation Files Selected for Review**

**85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:**

12

<p><b>86. 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 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 abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>10</p>
<p><b>88. Did your sample of INMATE-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 inmate-on-inmate sexual abuse investigation files)</p>
<p><b>89. 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>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>2</p>
<p><b>91. 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>92. 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>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>3</p>
<p><b>94. 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>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>96. 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>97. 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>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	32
<b>99. 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>100. 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>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No text provided.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>102. 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 checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:</b>	1

<b>Non-certified Support Staff</b>	
<p><b>103. 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>108. 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>Corrections Consulting Services</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>115.11</p> <p>(a) The agency shall have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlining the agency's approach to preventing, detecting, and responding to such conduct. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors and the policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. This is evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the MDOC Prison Rape Elimination Act Manual and Director’s Office Memorandum dated 1/01/2017.</p> <p>(b) The agency employs or designates an upper-level, agency-wide PREA coordinator</p>

	<p>with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities. This was evidenced by the provided organizational chart and interview with the agency wide PREA coordinator.</p> <p>(c) The facility designates a PREA compliance manager with sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards. This was evidenced by the facility’s organizational chart and interview with the PREA compliance manager. The facility PREA compliance manager also answers directly to the facility warden.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.12</p> <p>(a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity’s obligation to adopt and comply with the PREA standards. The agency indicated that they have entered into or renewed contracts for confinement of inmates since the last PREA audit. The agency provided copies of these contracts which illustrated the requirement to comply with the PREA standards. The agency also supports this requirement in the Michigan Department of Corrections (MDOC) Prison Rape Elimination Act Manual.</p> <p>(b) All of the contracts require the agency to monitor the contractor's compliance with PREA standards. This was evidenced by the provided copies of the contracts that have been entered into. This was also supported by an interview with the agency contract administrator.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.13

(a) The agency ensures that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facility takes into consideration: (1) Generally accepted detention and correctional 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 inmates may be isolated); (6) The composition of the inmate 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. The facility indicated since the last PREA audit, the average daily population at the facility was 1775. Additionally, the facility indicated that the staffing plan was predicated on an inmate population of 1985. The facility provided MDOC Prison Elimination Act Manual, the facility staffing plan, interview with the facility warden and PREA compliance manager and site review observations confirmed compliance with this provision.

(b) Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The facility indicated in the PAQ there have not been instances that the staffing plan had not been complied with but if there had been any deviations, such occurrences would have been documented. This was supported by the MCOC Prison Rape Elimination Act Manual. An interview was also conducted with the facility warden who confirmed compliance with this provision.

(c) Whenever necessary, but no less frequently than once each year, for each facility the agency operates, in consultation with the PREA coordinator required by § 115.11, the agency shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of 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. Compliance with this provision was determined through review of the last facility staffing plan meeting that occurred in January of 2025.

(d) The facility has 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. This policy and practice is implemented for night shifts as well as day shifts. The facility policy prohibits staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility. This was evidenced by Policy Directive 04.04.100, the Prison Rape Elimination Act Manual and provided evidence of staff rounds throughout the facility on all 3 shifts. Interviews were also conducted with intermediate and higher-level facility staff that further illustrated compliance with this provision.

	Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.
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<b>115.14</b>	<b>Youthful inmates</b>
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	<b>Auditor Overall Determination:</b> Meets Standard
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	<b>Auditor Discussion</b>
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	115.14
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	<p>(a) The facility prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 05.01.140 Prisoner Placement and Transfer and an email dated March 20, 2025 in reference to juveniles housed at the facility within the audit time frames.</p>
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	<p>According to information provided by the facility, there was a total of one youthful inmate housed at the facility during the 12 months preceding the audit. During the sight review the auditor thoroughly reviewed the housing area designated for youthful inmates if and when they are at the facility. Based on these observations the auditor concluded that the facility was able to comply with requirements of this standard.</p>
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	<p>(b) The facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas outside of housing units. The agency always provides direct staff supervision in areas outside of housing unit where youthful inmates have sight, sound, or physical contact with adult inmates. This was evidenced by information contained in MDOC Prison Rape Elimination Act Manual.</p>
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	<p>Although there were no youthful inmates housed at the facility during the onsite portion of the audit, the auditor was able to observe the housing area dedicated to youthful inmates and had conversations with staff who confirmed compliance with this standard and its provisions.</p>
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	<p>(c) The facility documents the exigent circumstances for each instance in which youthful inmates' access to large-muscle exercise, legally required education services, and other programs and work opportunities were denied. The facility reported that within the last 12 months there were a total of zero youthful inmates that were placed in isolation in order to separate them from adult inmates.</p>
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	<p>Compliance as determined through information contained in the MDOC Prison Rape Elimination Act Manual and the Women's Huron Valley Correctional Facility Operating Procedure 03.02.120D Youth Programming policy.</p>
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	<p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially 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>115.15</p> <p>(a) The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. This is evidenced by MDOC Prison Rape Elimination Act Manual and Policy Directive #04.04.110 Search and Arrest in Correctional Facilities. It should be noted that within the Search and Arrest in Correctional Facilities Policy Directive, transgender inmates have the ability to request a search accommodation.</p> <p>The facility reported that during the last 12 months there have been a total of zero cross-gender strip or cross-gender visual body cavity searches of inmates.</p> <p>During the site review process there were no areas of concern where staff of the opposite gender were in the vicinity of strip searches or were required to supervise strip searches.</p> <p>(b) This facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. Additionally, the facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. This was evidenced by information contained in the MDOC Prison Rape Elimination Act Manual and Policy Directive #04.04.110 Search and Arrest in Correctional Facilities.</p> <p>The facility reported there were a total of zero pat-down searches of female inmates by male staff.</p> <p>Compliance with this provision was also confirmed through interviews with female inmates and random staff interviews at the facility.</p> <p>(c) The facility documents all cross-gender strip searches and cross-gender visual body cavity searches, and documents all cross-gender pat-down searches of female inmates. This was evidenced in Policy Directive #04.04.110 Search and Arrest in Correctional Facilities and the MDOC Prison Rape Elimination Act Manual.</p> <p>(d) The facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical 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. Such policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Prison Rape Elimination Act and</p>

	<p>Prohibited Sexual Conduct Involving Prisoners. Compliance was also determined through interviews with random staff, random staff and the site review process.</p> <p>(e) The facility does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate’s genital status. If the inmate’s genital status is unknown, it may be determined 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. The facility is compliant with this requirement as evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive #04.06.184 Gender Dysphoria policies. Compliance was also determined through interviews of random staff and transgender inmates at the facility.</p> <p>The facility also confirmed that even through the PAQ indicated there had been searches of transgender or intersex inmates for the sole purpose of determining their genital status, that actually had not occurred at the facility at any time.</p> <p>(f) The agency trains all security staff on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. This was evidenced by the MDOC Prison Rape Elimination Act Manual and search training curricula provided by the facility.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.16</p> <p>(a) The agency takes appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech 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. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. An agency is</p>

not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans with Disabilities Act, 28 CFR 35.164. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners policies. Partial compliance was also determined through interviews with the agency head, inmates with disabilities or who are limited English proficient and site review observations.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload the contract the agency/facility has with interpreters or other professionals hired to ensure effective communication with inmates.
2. Upload documentation of staff training on PREA-compliant practices for inmates with disabilities.

Corrective Action Taken:

1. The facility uploaded a contract with Bromberg and Associates as the entity providing language translation services for the facility.
2. The facility provided training records illustrating that staff have taken training on PREA-compliant practices for inmates that are considered disabled.

(b) The agency takes 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive #03.03.140 Sexual Abuse and Sexual Harassment of Prisoners policies. Partial compliance was also determined through interviews with inmates with disabilities or who are limited English proficient and site review observations.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload the contract the agency/facility has with interpreters or other professionals hired to ensure effective communication with inmates.
2. Upload documentation of staff training on PREA-compliant practices for inmates with disabilities.

Corrective Action Taken:

1. The facility uploaded a contract with Bromberg and Associates as the entity providing language translation services for the facility.

	<p>2. The facility provided training records illustrating that staff have taken training on PREA-compliant practices for inmates that are considered limited English proficient.</p> <p>(c) The agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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. This was evidenced by the MDOC Prison Rape Elimination Act Manual. Compliance was also determined through interviews with random staff and inmates with disabilities or who are limited English proficient.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.17</p> <p>(a) The agency does not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who— (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 02.06111 Employment Screening and employment screening questions examples. Compliance was also determined through employee files reviews requested during the onsite portion of the audit.</p> <p>(b) The agency considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. This was evidenced by Policy Directive 02.06.111 Employment Screening and an interview with human resources staff.</p> <p>(c) Before hiring new employees who may have contact with inmates, the agency does: (1) Perform a criminal background records check; and (2) 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. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 02.06.111 Employment Screening. Compliance was also determined through an</p>

	<p>interview with human resources staff.</p> <p>The facility reported that over the last 12 months there were a total of 463 persons hired who may have contact with inmates that had a criminal background check as part of their hiring process.</p> <p>(d) The agency performs a criminal background records check before enlisting the services of any contractor who may have contact with inmates. This was evidenced by the Prison Rape Elimination Act Manual and Policy Directive 02.06.111 Employment Screening. Compliance was also determined through an interview with human resources staff.</p> <p>(e) The agency conducts criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive #02.06.111 Employment Screening. Compliance was also determined through an interview with human resources staff and the provided Record Office LEIN Log.</p> <p>(f) The agency asks 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 and in any interviews or written self-evaluations conducted as part of reviews of current employees. The agency shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. This was evidenced by an interview with human resources staff and the evidence that MDOC conducts criminal history background checks of all employees every year.</p> <p>(g) Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 02.06.111 Employment Screening.</p> <p>(h) The agency provides 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. This was evidenced by an interview with human resources staff.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>
	115.18

	<p>(a) When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse. The PAQ indicated that the facility had a substantial expansion/modification since the last PREA audit. Partial compliance with this provision was determined through interviews with the agency head and warden of the facility.</p> <p>Corrective Action Required:</p> <p>Within 180 days of this report, the facility will:</p> <ol style="list-style-type: none"> <li>1. Upload a memorandum or similar document outlining was substantial modifications have been made to the facility since the last PREA audit.</li> </ol> <p>Corrective Action Taken:</p> <ol style="list-style-type: none"> <li>1. The facility provided a memorandum dated 6/05/2025, clarifying that the Women’s Huron Valley Correctional Facility has not had any substantial modifications or expansions since July 22, 2019.</li> </ol> <p>(b) When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency’s ability to protect inmates from sexual abuse. Compliance with provision was determined through interviews with the agency head and facility warden. This was also supported through the MDOC Prison Rape Elimination Act Manual and provided Asset Change Request.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.21</p> <p>(a) To the extent the agency is responsible for investigating allegations of sexual abuse, the agency shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. Compliance with this provision was determined through the MDOC Prison Rape Elimination Act Manual, letter from the Michigan State Police which is the entity responsible for criminal investigations at the facility and provided investigator training materials and training materials illustrating the agency’s training and uniform evidence protocols. Additionally, interviews were conducted with random staff which further illustrated compliance with this provision.</p>

(b) The protocol shall be developmentally appropriate for youth where applicable, and, as appropriate, shall be 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. This was evidenced by the provided Basic Investigator Training Participant Manual, and MDOC Crime Scene Management and Preservation.

(c) The agency offers 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. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency documents its efforts to provide SAFEs or SANEs. This was evidenced by the MDOC Prison Rape Elimination Act Manual and a memorandum outlining that SAFE and SANE exams are conducted by St. Joseph Mercy Trinity Health Ann Arbor Hospital. An interview was also conducted with staff at the hospital who also confirmed that exams for the facility were conducted there.

The facility reported there were a total of zero SAFE/SANE/forensic medical exams conducted during the past 12 months.

(d) The agency attempts to make available to the victim a victim advocate from a rape crisis center. If a rape crisis center is not available to provide victim advocate services, the agency makes available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member. Agencies shall document efforts to secure services from rape crisis centers. For the purpose of this standard, a rape crisis center refers to an entity that provides intervention and related assistance, such as the services specified in 42 U.S.C. 14043g(b)(2)(C), to victims of sexual assault of all ages. The agency may utilize a rape crisis center that is part of a governmental unit as long as the center is not part of the criminal justice system (such as a law enforcement agency) and offers a comparable level of confidentiality as a non-governmental entity that provides similar victim services. This was evidenced by the Prison Rape Elimination Act Manual, Victim Advocate Memorandum dated 11/28/2016, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, Policy Directive 03.04.100 Health Services and a memorandum dated 4/12/2025 indicating advocacy is provided to the facility by Safehouse Center located in Ann Arbor. Compliance was also determined through interviews with the PREA compliance manager and inmates that reported sexual abuse.

(e) As requested by the victim, the victim advocate, qualified agency staff member, or qualified community-based organization a staff member 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. Compliance with this provision was determined through the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual

	<p>Abuse and Sexual Harassment of Prisoners, Policy Directive 03.04.100 Health Services, staff training transcripts, interviews with the PREA compliance manager and inmates that reported sexual abuse.</p> <p>(f) To the extent the agency itself is not responsible for investigating allegations of sexual abuse, the agency shall request that the investigating agency follow the requirements of paragraphs (a) through (e) of this section. This was evidenced by the Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and Policy Directive 03.04.100 Health Services.</p> <p>(h) A qualified agency staff member 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. This was evidenced by the training program that is provided to the qualified staff member to act in this capacity.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>115.22</p> <p>(a) The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 01.01.140 Internal Affairs and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through an interview with the agency head/designee.</p> <p>Corrective Action Required:</p> <p>Within 180 days of this report, the facility will:</p> <ol style="list-style-type: none"> <li>1. Upload a memorandum or similar document explaining how there could be 486 investigations within the last 12 months but none of those cases were referred for criminal investigation.</li> </ol> <p>Corrective Action Taken:</p> <ol style="list-style-type: none"> <li>1. The facility uploaded a memorandum dated 6/05/2025, clarifying that all investigations that are initiated and rise to the level of a potential criminal act, are</li> </ol>

	<p>referred for criminal investigation to the Michigan State Police. Additionally, the facility also explained the process that has been established for identifying and tracking cases that are referred for potential criminal investigation.</p> <p>(b) The agency has in place a policy 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. The agency publishes such policy on its website or, if it does not have one, makes the policy available through other means. The agency documents all such referrals. This was evidenced by the Prison Rape Elimination Act Manual, Policy Directive 01.01.140 Internal Affairs and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through an interview with investigative staff and confirmation that the investigative procedure is posted on the agency website.</p> <p>(c) The Michigan State Police are responsible for conducting criminal investigations, and the procedure between MDOC and the Michigan State Police describes the responsibilities of both the agency and the investigating entity. This was evidenced by the investigative procedure that is posted on the agency website.</p> <p>(d) The agency is responsible for conducting administrative investigations related to sexual abuse and sexual harassment, therefore this provision is not applicable.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.31</p> <p>(a) The agency trains all employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates 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 and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside</p>

authorities. This was evidenced by the provided MDOC training plan, training curriculum, the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through interviews of random facility staff.

(b) Training is tailored to the gender of the inmates at the employee’s facility. Employees receive additional training if the employee is reassigned from a facility that houses only female inmates, or vice versa. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and provided employee training curriculum and materials.

(c) All current employees who have not received such training shall be trained within one year of the effective date of the PREA standards, and the agency shall 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. In years in which an employee does not receive refresher training, the agency shall provide refresher information on current sexual abuse and sexual harassment policies. This was evidenced by the MDOC Prison Rape Elimination Act Manual the provided training plan and curriculum. The agency also provides refresher training on a yearly basis.

(d) The agency documents, through employee signature or electronic verification, that employees understand the training they have received.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Provide examples of completed employee training records which clearly illustrate that the employee completed the training and understood the training they completed as required in the provision.

Corrective Action Taken:

1. The facility provided a memorandum dated 6/05/2025, explaining that all employees that take PREA compliant training must take a quiz at the end of the training and obtain a passing score, illustrating that they understood the training they completed.

Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

115.32	<p>(a) The agency ensures 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. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.02.105 Volunteer Services and Programs, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and volunteer and contractor training materials. Compliance was also determined through interviews with contractors, volunteer and examples of contractor and volunteer training records.</p> <p>The facility also reported that there were a total of 380 contractors and volunteers, who may have contact with inmates, who have been trained on the agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection and response.</p> <p>(b) The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. This was evidenced by the MDOC Prison Rape Elimination Act Manual, volunteer and contractor training curricula and Policy Directive 03.02.105 Volunteer Services and Programs. Compliance was also determined through interviews with volunteers and contractors.</p> <p>(c) The agency maintains documentation confirming that volunteers and contractors understand the training they have received. This was evidenced by the completion of training which is delivered electronically and records the volunteer and contractor completion and understanding of the materials delivered.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.33</p> <p>(a) During the intake process, inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 04.01.140 Prisoner Orientation, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and provided MDOC intake forms illustrating that inmate</p>

education was delivered. Compliance was also determined through interviews with an intake staff member at the facility, random inmate interviews, a live demonstration provided to the auditor by a counselor at the facility and site review observations.

The facility reported that there was a total of 486 inmates admitted to the facility over the last 12 months and 100 percent of those inmates were given information during intake.

(b) Within 30 days of intake, the agency provides comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. This was evidenced by examples provided by the facility of 30-day inmate education attendance, interviews with an intake staff member, random inmates at the facility and site review observations.

(c) Current inmates who have not received such education are educated within one year of the effective date of the PREA standards, and shall 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. This was evidenced by a Memorandum generated on 1/15/2020 regarding inmate education, the MDOC Prison Rape Elimination Act Manual, an interview with an intake staff member and examples of inmate education completion acknowledgements.

(d) The agency provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, otherwise disabled, as well as to inmates who have limited reading skills. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and multiple handouts provided by the facility in languages other than English and in braille and for those who are otherwise disabled. Compliance was also determined through site review observations.

(e) The agency maintains documentation of inmate participation in these education sessions. This was evidenced by the Prison Rape Elimination Act Prisoner Information Verification-72 Hour form. This form documents the inmate's participation in PREA education. Compliance was also determined through spot checks of inmate files that contained copies of PREA education forms and examples provided by the facility of inmate's participation in inmate education sessions, which were documented.

(f) In addition to providing such PREA education, the agency ensures that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats. This was evidenced by site review observations and educational materials distributed to the inmate population.

Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.

<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.34</p> <p>(a) In addition to the general training provided to all employees pursuant to § 115.31, the agency ensures that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the provided investigator training curriculum, investigator training records and interviews with an investigative staff member.</p> <p>(b) Specialized training includes 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. This was evidenced by provided investigator training records and an interview with an investigative staff member.</p> <p>(c) The agency maintains documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. This was evidenced by the provided investigator training records.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.35</p> <p>(a) The agency ensures that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. This was evidenced by the MDOC Prison Rape Elimination Act Manual, interviews with medical and mental health staff and provided training curriculum for all medical and mental health personnel.</p> <p>The facility also reported that they had a total of 39 medical and mental health care</p>

	<p>practitioners that work regularly at the facility who received the training required by agency policy. The facility also reported that 100 percent of those staff completed the required training.</p> <p>(b) There are no medical staff employed by the agency conducting forensic examinations, therefore this provision is not applicable to this facility. The facility PAQ originally listed that medical staff were authorized to conduct forensic medical exams but that was later clarified because all such exams only occur at outside facilities. Compliance was also determined through interviews with medical and mental health staff at the facility and a clarification memorandum provided by the facility.</p> <p>(c) The agency maintains documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere. This was evidenced by training records for medical and mental health staff that work at the facility.</p> <p>(d) Medical and mental health care practitioners also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency. This was evidenced by training records for medical and mental health staff that work at the facility and training curriculum provided.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with the standard.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.41</p> <p>(a) All inmates are assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This is evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the MDOC Prison Rape Elimination Act Manual, interviews with a staff member responsible for the risk screening process, random inmates throughout the facility and site review observations.</p> <p>(b) The intake screening ordinarily takes place within 72 hours of arrival at the facility. This was evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and Policy Directive 05.01.140 Prisoner Placement and Transfer. Compliance was also determined through an interview with the staff member responsible for the risk screening process and interviews with random and</p>

targeted inmate population.

The facility reported that there was a total of 469 inmates that entered the facility, either through intake or transfer, within the last 12 months whose length of stay was for 72 hours or more, who were screened for risk of sexual victimization or risk of sexually abusing inmates.

(c) Such assessments shall be conducted using an objective screening instrument. This was evidenced by the provided MDOC risk screening tool and supported by the MDOC Prison Rape Elimination Act Manual.

(d) The intake screening considers, 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; (2) The age of the inmate; (3) The physical build of the inmate; (4) Whether the inmate has previously been incarcerated; (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child; (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) The inmate's own perception of vulnerability; and (10) Whether the inmate is detained solely for civil immigration purposes. This was evidenced by the MDOC risk screening tool, an interview with the staff responsible for the risk screening process and site review observations.

(e) The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. This was evidenced by an interview with the staff member responsible for the risk screening process, site review observations and review of the provided MDOC risk screening tool.

(f) Within a set time period, not to exceed 30 days from the inmate's arrival at the facility, 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. This was evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the MDOC Prison Rape Elimination Act Manual and Policy Directive 05.01.140 Prisoner Placement and Transfer. Compliance was also determined through an interview with the staff member responsible for the risk screening process, and random and targeted inmate interviews.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Establish a more robust tracking procedure to identify and complete 30-day risk screening reassessments as required under the provision.
2. The facility will provide inmate records illustrating that the risk screening reassess has been completed for all inmates at the facility, even those who may have been at

the facility for an extended period of time.

3. The facility must prove by process that the tracking procedure has become institutionalized at the facility.

Corrective Action Taken:

1. The facility provided a memorandum dated 6/05/2025, outlining the process that staff are required to follow ensuring compliance with 30-day risk screening reassess requirement.

2. The facility provided multiple examples of inmate 30-day risk screening reassessments that have been recently completed as proof documentation.

3. The facility provided a memorandum dated 6/05/2025, indicating that during the reporting period of 3/24/2025 through 3/24/2025, there were a total of 570 inmates reassessed after their arrival.

(g) An inmate's risk level is reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. This was evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and the MDOC Prison Rape Elimination Act Manual. Compliance was also determined through an interview with the staff member responsible for the risk screening process and random interview interviews.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload examples of current completed inmate risk screening examples for review.

Corrective Action Taken:

1. The facility provided multiple new examples of inmate risk screenings that have been completed, illustrating compliance with this provision.

(h) Inmates are not be 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. This was evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and the MDOC Prison Rape Elimination Act Manual. Compliance was also determined through an interview with the staff member responsible for the risk screening process.

(i) The agency has implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates. This was evidenced by interviews with the agency PREA coordinator, PREA compliance manager and an interview with a staff member that is responsible for the risk screening process. Compliance was also determined through site review observations specific to how access is controlled to sensitive information and who has

	<p>access to that information.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.42</p> <p>(a) The agency uses information from the risk screening required by § 115.41 to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the MDOC Prison Rape Elimination Act Manual, Policy Directive 05.01.140 Prisoner Placement and Transfer. Compliance was also determined through interviews with the PREA compliance manager and a staff member that is responsible for the risk screening process.</p> <p>(b) The agency makes individualized determinations about how to ensure the safety of each inmate. This was evidence by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, the MDOC Prison Rape Elimination Act Manual and an interview with the staff member responsible for the risk screening process.</p> <p>(c) In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency considers on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether the placement would present management or security problems. This was evidenced by the Prison Rape Elimination Act Manual, Policy Directive 04.06.184 and Director's Office Memorandum dated 12/16/2021. Compliance was also determined through interviews with the facility PREA compliance manager and transgender inmates at the facility.</p> <p>(d) Placement and programming assignments for each transgender or intersex inmate are reassessed at least twice each year to review any threats to safety experienced by the inmate. This was evidenced with interviews with the facility PREA compliance manager and a staff member responsible for the risk screening process.</p> <p>(e) A transgender or intersex inmate's own view with respect to his or her own safety are given serious consideration. This was evidenced by interviews with the facility PREA compliance manager, a staff member responsible for the risk screening process and transgender inmates at the facility.</p> <p>(f) Transgender and intersex inmates are given the opportunity to shower separately</p>

	<p>from other inmates. This was evidenced by interviews with the facility PREA compliance manager, a staff member responsible for the risk screening process, transgender inmates at the facility and site review observations.</p> <p>(g) The agency does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates. This was evidenced by interviews with the agency PREA coordinator, facility PREA compliance manager and transgender/ intersex/gay/lesbian inmates. Compliance was also determined through site review observations.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.43</p> <p>(a) Inmates at high risk for sexual victimization are not be placed 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. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 04.05.120 Segregation Standards. Compliance was also determined through an interview with the facility warden.</p> <p>The facility reported there were a total of 2 inmates over the past 12 months who were held in involuntary segregated housing for one to 24 hours awaiting completion of an assessment.</p> <p>(b) Inmates placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work 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. This was evidenced by interviews with staff who supervise inmates in segregated housing.</p>

(c) The facility assigns such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30 days. This was evidenced by interviews with the facility warden, staff who supervise inmates in segregated housing and inmates who alleged to have suffered sexual abuse at the facility.

The facility reported that in the past 12 months there were a total of zero inmates held in involuntary segregated housing for longer than 30 days while awaiting alternative placement.

(d) If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, the facility clearly documents: (1) The basis for the facility's concern for the inmate's safety; and (2) The reason why no alternative means of separation can be arranged. This was evidenced by Policy Directive 04.05.120 Segregation Standards and documentation provided by the facility of the 2 inmates that were held in involuntary segregated housing.

(e) Every 30 days, the facility affords each such inmate a review to determine whether there is a continuing need for separation from the general population. This was evidenced by the Prison Rape Elimination Act Manual and Policy Directive 04.05.120 Segregation Standards. Compliance was also determined through interviews with staff that supervise inmates in segregated housing and inmates that have alleged to have suffered sexual abuse at the facility. Additionally, the facility provided documentation further illustrating compliance with this provision.

Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.

115.51	Inmate reporting
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.51</p> <p>(a) The agency provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, MDOC handouts, flyers and postings. Compliance was also determined based on interviews with random staff, random inmates and site review observations, including assessments of reporting mechanisms.</p> <p>(b) The agency provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to</p>

	<p>receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. This was evidenced by an MOU between the Michigan Department of Corrections and the Legislative Corrections Ombudsman's Office, the Prison Rape Elimination Act Manual, Policy Directive 05.03.118 Prisoner Mail and a Memorandum dated 1/14/2020 indicating that MDOC does not detain inmates solely for civil immigration purposes. Compliance was also determined through interviews with the facility PREA compliance manager, random inmate interviews, site review observations and a test of the third-party reporting mechanism.</p> <p>(c) Staff accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through site review observations, interviews with random staff and random and targeted inmates throughout the facility.</p> <p>(d) The agency provides a method for staff to privately report sexual abuse and sexual harassment of inmates. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and signage available throughout the facility. Compliance was also determined through interviews with random staff at the facility and a test and assessment of the staff reporting procedures.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.52</p> <p>(a)-(g) The agency does not have an administrative procedure to address grievances regarding sexual abuse. This is evidenced by Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and is therefore exempt from this standard.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
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	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>115.53</p> <p>(a) The facility provides 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, and, for persons detained solely for civil immigration purposes, immigrant services agencies. The facility shall enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, Policy Directive 05.03.130 Prisoner Telephone Use and inmate informational handouts. Compliance was also determined through interviews with random inmates, inmates that reported sexual abuse, site review observations and a physical test of the outside confidential emotional support hotline and mailing address provided by Just Detention International.</p> <p>(b) The facility informs 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. This was evidenced by a Memorandum from Just Detention International, the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and the MDOC Prisoner Guidebook. Compliance was also determined through interviews with random inmates and inmates that reported sexual abuse.</p> <p>(c) The agency maintains 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. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements. This was evidenced by a Memorandum established with Just Detention International.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	115.54

	<p>(a) The agency has established a method to receive third-party reports of sexual abuse and sexual harassment and distributes publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. This is evidenced by publicly distributed information on the MDOC website, the MDOC Prison Rape Elimination Act Manual and the MOU established between MDOC and the Michigan Legislative Corrections Ombudsman’s Office. Compliance was also determined through site review observations and a test to the ombudsman’s office.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.61</p> <p>(a) The agency requires 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and the MDOC Employee Handbook. Compliance was also determined through interviews with random staff throughout the facility and site review observations and testing procedures.</p> <p>(b) Apart from reporting to designated supervisors or officials, staff do not not reveal 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 decision. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through interviews with random staff throughout the facility.</p> <p>(c) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners are required to report sexual abuse pursuant to paragraph (a) of this section and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. This was evidenced by interviews with medical and mental health staff.</p> <p>(d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting</p>

	<p>laws. This was evidenced by interviews with the facility warden and agency PREA coordinator.</p> <p>(e) The facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators. This was evidenced by an interview with the facility warden and any investigative reports that were applicable to this provision.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.62</p> <p>(a) When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 05.01.140 Prisoner Placement and Transfer. Compliance was also determined through interviews with the agency head/designee, the facility warden and random staff throughout the facility.</p> <p>The facility reported that over the past 12 months there have been a total of zero times the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.63</p> <p>(a) Upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation notifies the head of the facility or appropriate office of the agency where the alleged abuse occurred. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and</p>

	<p>examples of notifications to other facilities.</p> <p>The facility reported that over the past 12 months there were a total of zero allegations the facility received that an inmate was abused while confined at another facility.</p> <p>(b) Such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>(c) The agency and facility documents that it has provided such notification within 72 hours of receiving the allegation. This was evidenced by a sample notification to another facility.</p> <p>(d) The agency policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through interviews with the agency head/designee and the facility warden.</p> <p>The facility reported that over the last 12 months, they received a total of zero allegations of sexual abuse from other facilities.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard</p>
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<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.64</p> <p>(a) Upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report is required to: (1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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. This was evidenced by the MDOC Prison Rape Elimination Act Manual and various</p>

training materials provided for both line staff and investigative staff. Compliance was also determined through interviews random security staff and inmates that reported sexual abuse.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. The facility must accurately verify 11.64 (a) 9,10,11. These numbers cannot be accurate based on the information provided earlier that in the past 12 months there were a total of 329 allegations where staff were notified within a time period that still allowed for the collection of physical evidence.
2. The facility will upload a memorandum or similar document explaining the numbers requested in 9, 10, 11.

Corrective Action Taken:

1. The facility provided a memorandum dated 7/21/2025, explaining and verifying the number of sexual abuse cases reported and the number of instances where those cases were reported within a time period that allowed for the collection of physical evidence.
2. The aforementioned memorandum dated 7/21/2025, also provide details on first responder responsibilities per agency policy.

(b) If the first staff responder is not a security staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. This was evidenced by. This was evidenced by the MDOC Prison Rape Elimination Act Manual and the MDOC Sexual Violence Response and Investigation Pocket Guide. Compliance was also determined through interviews with security and non-security first responders and interviews with random facility staff.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. The facility must accurately verify 11.64 (b) 4,5. These numbers cannot be accurate based on the fact that agency policy requires non-security staff to request the alleged victim not take any actions that could destroy physical evidence and policy that requires security staff be notified of a potential allegation.
2. The facility will upload a memorandum or similar document explaining the numbers requested in 4, 5.

Corrective Action Taken:

1. The facility provided a memorandum dated 7/21/2025, verifying the numbers provided in the PAQ and that the numbers provided were accurate to the best of their knowledge.

	Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.
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<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.65</p> <p>(a) The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Corrective Action Required:</p> <p>Within 180 days of this report, the facility will:</p> <ol style="list-style-type: none"> <li>1. Upload a copy of the facility coordinated response plan for review.</li> </ol> <p>Corrective Action Taken:</p> <ol style="list-style-type: none"> <li>1. The facility provided a copy of the Women’s Huron Valley coordinated response plan.</li> </ol> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.66</p> <p>(a) Neither the agency nor any other governmental entity responsible for collective bargaining on the agency's behalf enters into or renews any collective bargaining agreement or other agreement that limits 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. This was evidenced by multiple collective bargaining agreements that</p>

	<p>represent employees with the Michigan Department of Corrections. Compliance was also determined through an interview with the agency head/designee and agreements provided with authorized labor organizations.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.67 Agency protection against retaliation</b>	
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.67</p> <p>(a) The agency has 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, and shall designate which staff members or departments are charged with monitoring retaliation. This was evidenced through the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. The facility designates the PREA compliance manager as the individual who is responsible for the retaliation monitoring of inmates at the facility.</p> <p>(b) The agency employs 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. This was evidenced by interviews with the agency head/designee, the facility warden, the PREA compliance manager/individual responsible for monitoring retaliation, inmates who have alleged to have suffered sexual abuse and inmates that reported sexual abuse.</p> <p>(c) For at least 90 days following a report of sexual abuse, the agency monitors the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation. Items the agency should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. This was evidenced by the Prison Rape Elimination Act Manual and Policy Directive #03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. The PAQ also noted that over the course of the last 12 months there had been zero instances of retaliation reported. Compliance was also determined through interviews with the facility warden and PREA compliance manager/individual responsible for retaliation monitoring.</p>

The facility reported that over the last 12 months there have been a total of zero instances of identified retaliation.

Corrective Action Required:

The facility provided the audit team with investigative files during the onsite portion of the audit. The facility documents retaliation monitoring through a form that staff complete at 2-week intervals. The auditor reviewed multiple investigative files that illustrated that retaliation monitoring was not being carried out on a consistent basis or was missing completely from the file. The agency and the facility have a policy and procedure in place to monitor retaliation appropriately but as a matter of practice, there are gaps in consistently completing this process, especially if the inmate is transferred to another facility. It should be noted that retaliation monitoring may be happening as required but the supporting paperwork was not obvious to the auditor during the onsite portion of the audit.

Within 180 days of this report, the facility will:

1. Establish a more robust tracking process to ensure that retaliation monitoring occurs as outlined within agency policy. It is critical that this tracking process addresses when an inmate is transferred to another facility.
2. Ensure that retaliation monitoring paperwork is completed appropriately and is placed in either electronic storage or physical copies are placed in the investigative file for every allegation that requires retaliation monitoring.
3. The facility will provide the auditor with the new tracking process and provide examples of completed retaliation monitoring compliant with this provision.

Corrective Action Taken:

1. The facility provided a memorandum dated 3/19/2025, which outlines the new process that facility staff must utilize to ensure retaliation monitoring occurs as required in this provision.
2. The facility provided the auditor with the Michigan Department of Corrections Protection Against Retaliation Refresher Training program, which outlines the correct steps staff are required to take related to retaliation monitoring.
3. The facility provided the auditor with multiple recent written examples of inmate notifications of outcomes of investigations. These examples were provided through the Prison Rape Elimination Act Sexual Abuse Retaliation Monitoring form utilized by the agency.
  - (d) In the case of inmates, such monitoring includes periodic status checks. This was evidenced by an interview with the individual responsible for retaliation monitoring.
  - (e) If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency takes appropriate measures to protect that individual against retaliation. This was evidenced by an interview with the agency head/designee and

	<p>the facility warden.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.68</p> <p>(a) Any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of § 115.43. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 04.05.120 Segregation Standards. Compliance was also determined through interviews with the facility warden, a staff member who supervises inmates in segregated housing.</p> <p>The PAQ reported that there was a total of zero inmates that were placed in involuntary segregation over the last 12 months awaiting completion of an assessment, alternative placement or a continuing need to separate them from the general population. Compliance was also determined through interviews with the facility warden, a staff member who supervises inmates in segregated housing.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.71</p> <p>(a) When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. This was evidenced by the MDOC Prison Rape Elimination Act Manual, the MDOC Sexual Violence Response and Investigation Guide and Policy Directive 03.03.140. Compliance was also determined through review of the PREA Investigation Referral Checklist which outlines the required documentation based on the incident type and the dates that they were obtained, initiated and completed. Interviews were also conducted with investigative staff and investigative files were reviewed.</p>

(b) Where sexual abuse is alleged, the agency uses investigators who have received special training in sexual abuse investigations pursuant to § 115.34. This was evidenced by an interview with a facility investigator and training curriculum that facility investigators are required to complete.

(c) Investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. This was evidenced by investigative reports that were reviewed during the onsite portion of the audit and an interview with a facility investigator.

(d) When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. This was evidenced by an interview with a facility investigator and review of administrative investigative files.

(e) 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 inmate or staff. The agency does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. This was evidenced by an interview with a facility investigator and inmates that reported sexual abuse.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Incorporate valid credibility assessments into the administrative investigative process as required under this provision.
2. The facility will provide recent administrative investigation examples illustrating documented credibility assessments.

Corrective Action Taken:

1. The agency provided the Michigan Department of Corrections Operating Procedure 01.01.140 titled Internal Affairs. This policy further outlines the agency's procedures for internally investigating PREA related allegations. This policy further describes and the process of thoroughly investigating all PREA related allegations.
2. The agency provided the Michigan Department of Corrections Individual Training Program Report illustrating that investigators have now been trained on specifically incorporating credibility assessments into PREA investigative reports.
3. The agency provided the Michigan Department of Corrections Investigative Refresher Training specific to credibility assessments and includes a training video for investigators. The provided training video focuses on best practices and guidelines for investigators related to credibility assessments.

(f) Administrative investigations: (1) include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. This was evidenced by an interview conducted with a facility investigator, site review observations made of how files were secured and kept confidential, both electronically and on paper. Compliance was also determined through review of investigative files.

(g) Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. MDOC does not conduct their own criminal investigations and is only responsible for conducting administrative investigations related to allegation of sexual abuse and sexual harassment. Although this auditor has concerns about the decision-making process of the Michigan State Police and their willingness to conduct thorough criminal investigations, this concern lies outside the scope of this audit process for this facility.

(h) Substantiated allegations of conduct that appears to be criminal are referred for prosecution. This is evidenced by an interview with a facility investigator and review of investigative files provided. The review of investigations only included administrative investigations because the Michigan State Police is responsible for criminal investigations.

The facility reported there were a total of 7 allegations in the last 12 months that were substantiated and referred for prosecution.

(i) The agency retains all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. This was evidenced by the MDOC Prison Rape Elimination Act Manual and a review of investigative files.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload the agency retention policy related to administrative and criminal investigations as required under this provision.

Corrective Action Taken:

1. The facility provided the agency records retention and disposal policy that is compliant with this standard and its provisions.

(j) The departure of the alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation. This is evidenced by an interview with a facility investigator.

(l) When outside agencies investigate sexual abuse, the facility cooperates with outside investigators and shall endeavor to remain informed about the progress of

	<p>the investigation. This was evidenced by interviews with the agency head/designee, agency PREA coordinator, PREA compliance manager and investigative staff.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard</p>
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<b>115.72</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.72</p> <p>(a) The agency does not impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was evidenced by the MDOC Prison Rape Elimination Act Manual, the MDOC Interview and Investigation Techniques and Fundamentals Manual and an interview with a facility investigator. Compliance was also determined through a review of investigative files.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.73</p> <p>(a) Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and a review of investigative files that were available during the onsite portion of the audit.</p> <p>The facility reported there were a total of 329 criminal/administrative investigations completed by the facility. The total number of inmates that were notified of the outcome of the investigation was listed as 10. Partial compliance was also determined through interviews with the facility warden a facility investigative staff member and inmates that reported sexual abuse.</p> <p>Corrective Action Required:</p>

Within 180 days of this report, the facility will:

1. Upload a memorandum with an accurate number of investigations that match numbers provided earlier in the PAQ.
2. Upload a memorandum or similar document explaining why only 10 inmates were notified of the outcome of their investigations.

Corrective Action Taken:

1. The facility provided the auditor with a memorandum dated 7/28/2025, outlining why the facility only reported that 10 inmates were notified of the outcome of their investigations. The facility reported that they have established a new process to ensure that all investigations that are conducted by the facility are followed with the appropriate Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Finding.

(b) If the agency did not conduct the investigation, it requests the relevant information from the investigative agency in order to inform the inmate. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and an interview with a facility investigator.

The facility reported there were a total of 3 investigations completed by an outside agency. Of those investigations there were a total of 2 inmates that were notified of the outcome.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload a memorandum explaining why this number of criminal investigations is different from what was reported earlier in the PAQ. If these numbers are accurate that is fine but the facility must verify and make sure all areas of the PAQ reflect consistent numbers.

Corrective Action Taken:

1. The facility provided a memorandum dated 7/28/2025, explaining the discrepancy between the number of criminal investigations reported in the PAQ. The memorandum explains the new process the facility is using to track criminal and administrative investigations to ensure accurate numbers and accountability.

(c) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency subsequently informs the inmate (unless the agency has determined that the allegation is unfounded) whenever: (1) The staff member is no longer posted within the inmate's unit; (2) The staff member is no longer employed at the facility; (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse

within the facility. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and examples of substantiated and unsubstantiated complaints. Compliance was also determined through interviews with inmates that reported sexual abuse.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload examples of completed inmate notifications of outcomes of investigations. A few recent examples will satisfy the requirement.

Corrective Action Taken:

1. The facility uploaded recent examples of inmate notifications of outcomes of investigations that are compliant with this standard.

(d) Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever: (1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was partially determined through interviews with inmates that reported sexual abuse and examples of inmate notifications.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload examples of completed inmate notifications of outcomes of investigations as required under the provision.

Corrective Action Taken:

1. The facility uploaded recent examples of inmate notifications of outcomes of investigations that are compliant with this standard.

(e) All such notifications or attempted notifications shall be documented. This was evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.

The facility reported there were a total of zero notifications provided to inmates pursuant to this standard.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload a memorandum or similar document illustrating accurate numbers of total

	<p>notifications and total number of notifications that were documented.</p> <p>Corrective Action Taken:</p> <p>1. The facility provided the auditor with a memorandum dated 7/28/2025, outlining why the facility only reported that 10 inmates were notified of the outcome of their investigations. The facility reported that they have established a new process to ensure that all investigations that are conducted by the facility are followed with the appropriate Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Finding.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.76</p> <p>(a) Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. This is evidenced by the MDOC Prison Rape Elimination Act Manual, the MDOC Employee Handbook, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, Policy Directive 03.03.130 Humane Treatment and Living Conditions for Prisoners and Policy Directive 02.03.100 Employee Discipline.</p> <p>(b) Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse. This was evidenced by the MDOC Prison Rape Elimination Act Manual, the MDOC Employee Handbook, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, Policy Directive 03.03.130 Humane Treatment and Living Conditions for Prisoners and Policy Directive 02.03.100 Employee Discipline.</p> <p>The facility reported that in the last 12 months there was a total of 1 staff member from the facility that violated agency sexual abuse or sexual harassment policies.</p> <p>The facility reported that in the past 12 months there were a total of zero staff from the facility that were terminated for violating agency sexual abuse or harassment policies.</p> <p>(c) Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. This is evidenced by the MDOC Prison Rape Elimination Act</p>

Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.

The facility reported that in the last 12 months, there were a total of 1 staff member that were disciplined short of termination, for violating agency sexual abuse or sexual harassment policies.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Provide information related to the referenced 1 incident that a staff member violated agency sexual abuse or sexual harassment policies and was disciplined short of termination.

Corrective Action Taken:

1. The facility provided the requested 1 incident that a staff member violated agency sexual abuse or sexual harassment policies and was disciplined short of termination for this auditor's review.

(d) 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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.

The facility reported there were a total of 1 staff from the facility that were reported to law enforcement or licensing boards following their termination for violating sexual abuse or sexual harassment policies.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Provide information related to the referenced 1 incident where a staff member was reported to law enforcement or licensing boards following their termination for violating agency sexual abuse or sexual harassment policies.

Corrective Action Taken:

1. The facility provided a memorandum dated 6/05/2025, explaining the 1 incident where a staff member quit prior to the completion of the investigation.

Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.

	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>115.77</p> <p>(a) Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and is reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>The facility originally there were contractors or volunteers that were reported to law enforcement for engaging in sexual abuse of inmates. However, this information was later clarified in the attached memorandum which indicates there were zero contractors or volunteers that were reported to law enforcement.</p> <p>(b) The facility takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was as determined through an interview with the facility warden.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>

<p><b>115.78</b></p>	<p><b>Disciplinary sanctions for inmates</b></p>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>115.78</p> <p>(a) Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners and Policy Directive 03.03.105 Prisoner Discipline.</p> <p>The facility reported in the last 12 months, there were a total of 4 administrative findings of inmate-on-inmate sexual abuse that occurred at the facility.</p> <p>The facility also reported that in the last 12 months, there were a total of zero findings of guilt for inmate-on-inmate abuse that occurred at the facility.</p>

	<p>(b) Sanctions shall be 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. This is evidenced by an interview with the facility warden and review of investigative files.</p> <p>(c) The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. This is evidenced by an interview with the facility warden and review of investigative files.</p> <p>(d) The facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. This was evidenced by interviews with medical and mental health staff.</p> <p>(e) The agency may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. This is evidenced by the MDOC Prison Rape Elimination Act Manual.</p> <p>(f) For the purpose of 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.105 Prisoner Discipline and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>(g) An agency may, in its discretion, prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.105 Prisoner Discipline and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>115.81</p> <p>(a) If the screening pursuant to § 115.41 indicates that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting</p>

or in the community, staff ensures that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. This is evidenced by the MDOC Prison Rape Elimination Act Manual.

The facility reported that 100% of inmates who disclosed prior sexual victimization during the risk screening were offered a follow-up meeting with a medical or mental health provider. Compliance was also determined through interviews with inmates that disclosed sexual victimization through the risk screening process and a staff member responsible for the risk screening process.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload the required medical/mental health secondary materials as outlined in this provision.

Corrective Action Taken:

1. The facility provided the auditor with medical/mental health secondary materials that were compliant with this standard.

(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, staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. This is evidenced by the MDOC Prison Rape Elimination Act Manual.

The facility reported that 100% of inmates who have previously perpetrated sexual abuse, were offered a follow-up meeting with a mental health practitioner.

Compliance was also determined through interview with a staff member responsible for the risk screening process.

Corrective Action Required:

Within 180 days of this report, the facility will:

1. Upload the required medical/mental health secondary materials as outlined in this provision.

Corrective Action Taken:

1. The facility provided the auditor with medical/mental health secondary materials that were compliant with this standard.

(d) Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and

	<p>Sexual Harassment of Prisoners and Policy Directive 03.04.108 Prisoner Health Information. Compliance was also determined through site review observations specific how sensitive information is collected, stored and disseminated.</p> <p>(e) Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.04.100 and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through interviews with both medical and mental health staff.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.82</p> <p>(a) 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual, Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners, Policy Directive 03.04.125 Medical Emergencies and Policy Directive 03.04.100 Health Services. Compliance was also determined through interviews with medical and mental health staff and inmates who reported sexual abuse.</p> <p>Corrective Action Required:</p> <p>Within 180 days of this report, the facility will:</p> <ol style="list-style-type: none"> <li>1. Upload the required medical/mental health secondary materials as outlined in this provision.</li> </ol> <p>Corrective Action Taken:</p> <ol style="list-style-type: none"> <li>1. The facility provided the auditor with medical/mental health secondary materials that were compliant with this standard.</li> </ol> <p>(b) If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps</p>

	<p>to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. This is evidenced by interviews conducted with random security staff at the facility.</p> <p>(c) Inmate victims of sexual abuse while incarcerated are 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. This is evidenced by interviews with medical and mental health staff and inmates who reported sexual abuse.</p> <p>(d) Treatment services are 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. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.83</p> <p>(a) The facility offers 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services.</p> <p>(b) The evaluation and treatment of such victims includes, 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. This is evidenced by interviews with medical and mental health staff and inmates that reported sexual abuse.</p> <p>(c) The facility provides such victims with medical and mental health services consistent with the community level of care. This is evidenced by interviews with medical and mental health staff.</p> <p>(d) Inmate victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services.</p> <p>(e) If pregnancy results from the conduct described in paragraph (d) of this section, such victims receive timely and comprehensive information about and timely access</p>

	<p>to all lawful pregnancy-related medical services. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services.</p> <p>(f) Inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services. Compliance was also determined through interviews with inmates that reported sexual abuse.</p> <p>(g) Treatment services are 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services. Compliance was also determined through interviews with inmates that reported sexual abuse.</p> <p>(h) All prisons 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.04.100 Health Services. Compliance was also determined through interviews with medical and mental health staff.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.86</p> <p>(a) The facility conducts 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>The facility reported that over the last 12 months, there were a total of 267 criminal/administrative investigations that alleged sexual abuse completed by the facility.</p> <p>(b) Such reviews shall ordinarily occur within 30 days of the conclusion of the investigation. This was evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>The facility reported that over the last 12 months, there were a total of 267 criminal/administrative investigations of alleged sexual abuse that were investigated by the</p>

	<p>facility and were followed by a sexual abuse incident review.</p> <p>(c) The review team includes upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through an interview with the facility warden and sexual abuse incident reviews that were included with the investigative files.</p> <p>(d) The review team shall: (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better 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; or 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 paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners. Compliance was also determined through interviews with the facility warden, the PREA compliance manager and sexual abuse incident team member.</p> <p>(e) The facility implements the recommendations for improvement, or shall document its reasons for not doing so. This is evidenced by the MDOC Prison Rape Elimination Act Manual and Policy Directive 03.03.140 Sexual Abuse and Sexual Harassment of Prisoners.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.87</p> <p>(a) The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. This is evidenced by the MDOC Prison Rape Elimination Act Manual and the last several years of completed Annual Surveys of Sexual Victimization.</p>

	<p>(b) The agency aggregates the incident-based sexual abuse data at least annually. This is evidenced by the uploaded last several years' worth of agency annual reports.</p> <p>(c) The incident-based data collected includes, 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual.</p> <p>(d) The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. This is evidenced by the MDOC Prison Rape Elimination Act Manual.</p> <p>(e) The agency also obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates. This is evidenced by the MDOC Prison Rape Elimination Act Manual.</p> <p>(f) Upon request, the agency provides all such data from the previous calendar year to the Department of Justice no later than June 30.</p> <p>Corrective Action Required:</p> <p>Within 180 days of this report, the facility will:</p> <ol style="list-style-type: none"> <li>1. Provide a memorandum or similar document explaining if the Department of Justice requested information from the facility and a brief synopsis of the information that was requested.</li> </ol> <p>Corrective Action Taken:</p> <ol style="list-style-type: none"> <li>1. The facility provided the auditor with a memorandum dated 6/06/2025, clarifying that the Department of Justice did not actually request information from the facility from the previous calendar year.</li> </ol> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.87</p> <p>(a) The agency reviews 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: (1) Identifying problem</p>

areas; (2) Taking corrective action on an ongoing basis; and (3) Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole. This is evidenced by the MDOC Prison Rape Elimination Act Manual and the 2023 MDOC annual report. Compliance was also determined through interviews with the agency head/designee, agency PREA coordinator and facility PREA compliance manager.

(b) Such reports include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the agency’s progress in addressing sexual abuse. This is evidenced by the MDOC Prison Rape Elimination Act Manual and the 2023 MDOC annual report.

(c) The agency’s report is 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. This is evidenced by a review of the annual reports available on the agency’s external website and what is required by the MDOC Prison Rape Elimination Act Manual. Compliance was also determined through an interview with the agency head/designee.

(d) The agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but does indicate the nature of the material redacted. This is evidenced by the MDOC Prison Rape Elimination Act Manual and the most recent MDOC annual report. Compliance was also determined through an interview with the agency PREA coordinator.

Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>115.89</p> <p>(a) The agency ensures that data collected pursuant to § 115.87 are securely retained. This is evidenced by the MDOC Prison Rape Elimination Act Manual and an interview with the agency PREA coordinator. Compliance was also determined through site review observations specific to data storage both electronic and physical copies.</p> <p>(b) The agency makes 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. This is evidenced by the MDOC Prison Rape Elimination Act Manual and a review of information available to the public on the agency external website.</p>

	<p>(c) Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. This is evidenced by the MDOC Prison Rape Elimination Act Manual and a review of information available to the public on the agency external website.</p> <p>(d) The agency maintains 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. This is evidenced by a review agency historical data that was available and through an interview with the agency PREA coordinator.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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>115.401</p> <p>(a) During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency ensures that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once. This was verified by reviewing the agency’s external website and all audit reports that were posted.</p> <p>(b) During each one-year period starting on August 20, 2013, the agency ensures that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, is audited. This was verified by reviewing the agency’s external website and all audit reports that were posted.</p> <p>(h) The auditor shall have access to, and shall observe, all areas of the audited facilities. The auditor was afforded full access to and was able to observe all areas of the facility during the onsite portion of the audit process.</p> <p>(i) The auditor shall be permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor was permitted to request and receive copies of any relevant documents during the entire audit process.</p> <p>(m) The auditor shall be permitted to conduct private interviews with inmates. The auditor was permitted to conduct private interviews with inmates throughout the facility.</p> <p>(n) Inmates shall be permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. This was verified by obtaining pictures of posted audit notices throughout</p>

	<p>the entire facility which were time stamped at least 6 weeks prior to the start of the onsite audit. The auditor received 15 letters from inmates at the facility and all inmates received a private interview which was documented.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</p>
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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>115.403</p> <p>(a) The agency ensures that the auditor’s final report is published on the agency’s website if it has one, or is otherwise made readily available to the public. This was evidenced by a review of the agency’s external website and prior audit reports that were completed and posted to the website for public review.</p> <p>Based upon information contained in the PAQ, policies, procedures and interviews conducted, the facility is substantially compliant with this standard.</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.)	na
<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).)	yes
<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).)	yes
	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).)	yes
<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).)	yes
	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).)	yes
	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).)	yes
<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)?	yes
<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.)	yes
<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.)	yes
<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.)	na
	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.)	yes
<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.)	na
	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.)	na
	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.)	na
<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).	yes
<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.)	yes
<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.)	yes
<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.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
<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>		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes