

# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim       Final

**Date of Interim Audit Report:** NA

*If no Interim Audit Report, select N/A*

**Date of Final Audit Report:** 1-13-26

## Facility Information

**Name of Facility:** Newberry Correctional Facility

### Summary of Audit Findings

*The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.*

**Auditor Note:** No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

#### Standards Exceeded

**Number of Standards Exceeded:** 1

**List of Standards Exceeded:** 115.67

#### Standards Met

**Number of Standards Met:** 44

#### Standards Not Met

**Number of Standards Not Met:** 0

**List of Standards Not Met:**

## PREVENTION PLANNING

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

### All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

#### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

#### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- 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  No

#### 115.11 (c)

- 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  No  NA
- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- Michigan Department of Corrections (MDOC) Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- Director's Office Memorandum 2017-12, Prison Rape Elimination Act (PREA), 1-1-17
- State of Michigan, Position Description PREA Coordinator, 11/2013
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division Organizational Chart, June 2017
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division Food Service and CFA Unit, June 2017
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division Procurement Unit, June 2017
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division Reentry, Community Corrections and FOA Unit, June 2017
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division Health Care and Substance Abuse Unit, March 2017
- MDOC Budget and Operations Administration Procurement, Monitoring and Compliance Division PREA Unit, March 2017
- MDOC Budget and Operations Administration Accounting Division, March 2017
- MDOC Budget and Operations Administration Budget and Projections Division, March 2017
- MDOC Budget and Operations Administration Physical Plant Division, March 2017
- MDOC Master Coordinator List, 6-4-25
- MDOC Prisoner Guidebook: June 2014
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Prisoner Guidebook, February 2025
- NCF Organizational Chart, January 2025
- NCF Shift Roster, 8-3-25
- NCF Staff/Contractor Roster: 8-14-25
- NCF Prisoner Roster: 7-31-25, 9-10-25

#### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff

#### Site Review Observations:

- The Michigan Department of Corrections PREA Coordinator oversees the Newberry Correctional Facility (NCF) PREA program.
- The PREA Compliance Manager is physically assigned to the NCF and maintains a permanent office, with routine activities, within said institution as a function of assignment.

#### Standard Subsections:

- (A) The agency does have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities that it operates directly or under contract. Specifically, Policy MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25, outlines “the Department’s zero-tolerance standard toward all forms of sexual abuse and sexual harassment involving prisoners and outlines the Department’s approach to preventing, detecting, and responding to such conduct. In speaking with the PREA Coordinator, it was noted that this policy clearly defines prohibited behaviors regarding sexual abuse and sexual harassment, including sanctions for those found to have participated in these behaviors, and describes agency strategies to reduce and prevent the sexual abuse and sexual harassment of prisoners.
- (B) The MDOC has employed an upper-level agency-wide PREA Coordinator, whose position is within the agency’s organizational structure. As this individual’s job responsibilities lie strictly with ensuring the agency’s compliance of its PREA program, this individual does have both sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. Additionally, the MDOC has exceeded this provision by the creation of a PREA Unit, which includes four regional PREA Analysts. As such, this allows the PREA Coordinator, in coordination with the regional PREA Analysts, to oversee and provide greater guidance in implementing PREA standards at the facility level.
- (C) The State of Michigan operates numerous correctional institutions. As a matter of agency protocol, each warden within these institutions has been charged with designating a PREA Compliance Manager. The NCF Warden affirms the designation of the PREA Compliance Manager to serve in this capacity. Documentation reflects that the PCM position is within the facility’s organizational structure. When interviewed, the PREA Compliance Manager further confirms both sufficient time and authority to coordinate the facility’s efforts in complying with the PREA standards.

#### Reasoning & Findings Statement:

This standard promotes agency expectations of zero-tolerance for sexual abuse and sexual harassment of prisoners. As well, its provisions require that each facility within the organization also operates with those same expectations. In this, not only has the agency developed policies designed to prevent, detect, and respond to instances of sexual abuse and sexual harassment of prisoners, but each facility, to include the NCF, has also developed its own unit specific coordinated response plan to help apply those broader agency policies more effectively to the unique circumstances of the individual facility. Thus, the NCF has ensured that every facet of the agency’s policy is aptly applied in the standard response procedures of each facility. Additionally, to ensure the agency’s zero-tolerance requirements are effectively maintained at the facility level, the agency has designated staffing for four Central Office PREA

Analysts serving as the agency-based PREA Compliance Unit. These positions function solely to better coordinate and advance the agency's efforts at significantly increasing the sexual safety of all prisoners within the agency. As such, the agency, and by extension the facility, has met the requirements of this standard.

## Standard 115.12: Contracting with other entities for the confinement of prisoners

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.12 (a)

- If this agency is public and it contracts for the confinement of its prisoners 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 prisoners.)  Yes  No  NA

#### 115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of prisoners.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

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#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25

- Intergovernmental Agreement (IGA) #165-0, 5-7-90
- MDOC County Contracts Communication, 4-25-24
- MDOC Eaton County Sheriff's Office, PREA Annual Report, 2024
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

Interviews:

- PREA Coordinator
- Agency Contract Administrator

Site Review Observations:

- The NCF is a publicly operated correctional facility through the Michigan Department of Corrections.

Standard Subsections:

- (A) The MDOC is a public agency that contracts for the confinement of its prisoners with one other public entity; namely, a Michigan county government. All contracts with this entity require said agencies “comply with the Final Rule of the Prison Rape Elimination Act (PREA) of June 20, 2012 (Federal Law 42 U.S.C. 15601) and all applicable PREA Standards (Attachment A) and the agency’s policies.” In speaking with the Agency Contract Administrator, adhere to contract guidelines, to include completion of regular PREA audits, is required for continued assignment of MDOC prisoners inside the county jail.
- (B) As such, said contracts also provide for agency contract monitoring to ensure that the contracted entity does comply with the PREA standards and further notes that “the Procurement, Monitoring and Compliance Division (PMCD) with the (MDOC) oversees the MDOC’s contracts and will ensure that the contractor is delivering services according to the contract requirements... The state contract monitor assigned to monitor this agreement will conduct regular monitoring of all contract related activities.”

Reasoning & Findings Statement:

This standard ensures that all private entities contractually bound to the MDOC adopt, comply, and maintain their adherence to the PREA standards. To ensure their compliance, the MDOC provides for a contract monitor to both engage in contract monitoring and to ensure training specific to contractor responsibilities under the MDOC’s zero-tolerance policy on the prevention, detection, and response of sexual abuse and sexual harassment have been met. As such, the MDOC, and by extension, the NCF, has satisfied all provisions within this standard.

## Standard 115.13: Supervision and monitoring

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

### 115.13 (a)

- Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect prisoners against sexual abuse?  
 Yes  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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 prisoners may be isolated)?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the prisoner population?  Yes  No
- 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  No
- 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  No  NA
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?  Yes  No
- 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  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  Yes  No

### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  
 Yes  No  NA

### 115.13 (c)

- Within the audit time frame, has the facility, in consultation with the PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?  Yes  No
- Within the audit time frame, has the facility, in consultation with the PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?  Yes  No
- Within the audit time frame, has the facility, in consultation with the 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  No

### 115.13 (d)

- 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  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- 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  No

### Auditor Overall Compliance Determination

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- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25

- MDOC Prison Rape Elimination Act (PREA) Annual Staffing Plan Review form, 12/13
- MDOC #04.04.100, Custody, Security, and Safety Systems, 6-1-19
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF #04.04.100-H, Administrative and Custody Rounds, 7-17-23
- NCF Prison Rape Elimination Act (PREA) Annual Staffing Plan Review: 7-30-24, 4-29-25
- NCF Organizational Chart, January 2025
- NCF Audit Report, December 2010
- NCF 3<sup>rd</sup> Year Performance Audit, August 21-22, 2024
- NCF Staffing Deviation Memo: 3-17-25, 4-11-25
- NCF Shifts, Daily Assignment: 4-27-25, 4-28-25, 4-29-25
- NCF Shift Roster, 8-3-25
- NCF Staff/Contractor Roster: 8-14-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Random Prisoners

#### Site Review Observations:

- All prisoner housing areas contain at least one security staff post that is continuously monitored by staff. All areas of high prisoner traffic are assigned permanent staffing positions while in operation.
- During the site review, supervisory staff were observed making routine rounds throughout the facility. All random staff, **as well as all prisoners interviewed**, did indicate that supervisory staff were available to them and routinely conducted unannounced rounds within the facility.
- During supervisory rounds, ranking officials were observed reviewing required documentation completed by line staff as a function of their duty posts.
- During the onsite portion of the audit, current NCF housing logs were inspected throughout the facility to ensure staff were conducting, and properly documenting, unannounced rounds and, were appropriate, opposite gender announcements. Supervisory signatures were observed in **green** ink.

#### Standard Subsections:

- (A) The NCF has developed a staffing plan that provides for adequate staffing levels and video monitoring to protect prisoners against sexual abuse. Per agency policy (03.03.140), the staffing plan, which was last updated on **April 29, 2025**, does take into consideration: (1) generally accepted detention and correctional practices; (2) any judicial finds of inadequacy (of which there were none); (3) any findings of inadequacy from federal investigative agencies (of which there were none); (4) any findings of inadequacy from internal or external oversight bodies (of which there were none); (5) all components of the facility's physical plant; (6) the composition

of the prisoner population; (7) the number and placement of supervisory staff; (8) institutional programs occurring on a particular shift; (9) applicable state or local laws, regulations, or standards; (10) the prevalence of substantiated and unsubstantiated incidents or sexual abuse; and (11) any other relevant factors. As noted by the NCF Warden, to ensure the safety of both staff and prisoners assigned to the institution, the facility staffing plan was predicated on the average daily number of prisoners assigned to the NCF, which is 1081 prisoners. During the audit time frame, the NCF has averaged 1081 prisoners. When asked, facility staff consistently remarked that unit administration does consider the nature of the prisoner population, as well as any current issues or trends within the prisoner population, when determining adequate staffing levels.

(B) MDOC policy (#04.04.100BB) requires that when staffing levels fall below minimum requirements, facility staff must document and justify all deviations. Per the NCF PCM, within the audit time frame, the facility has deviated from the staffing plan. The six most common reasons for deviating from the staffing plan in the past twelve months were: overtime, sick leave, facility emergency, hospital runs, FMLA, and staff shortage.

(C) In coordination with the PREA Coordinator, the NCF does review and assess its staffing plan, as well as the resources the facility has available to ensure adherence to the staffing plan, on at least an annual basis. As a function of that review, the facility does consider the need for, and use of, video and other monitoring technologies.

(D) MDOC policy (#04.04.100BB) does require each facility to have intermediate and higher-level supervisors on all shifts perform unannounced rounds to identify and deter sexual abuse and sexual harassment. Supervisors are subsequently required to document when these rounds are conducted. As well, policy prohibits staff from alerting other staff members when these unannounced rounds are occurring. The timing of the onsite portion of the audit allowed for the observation of staff from all shifts. In this, it was noted that unannounced rounds were properly documented by supervisory staff. Numerous housing and officer station logs were reviewed onsite. These logs, which were documented by supervisors using green ink, reflected a historic pattern of supervisory presence throughout the facility. Interviews with intermediate and higher-level staff further confirm that supervisors do routinely conduct unannounced rounds at differing times and locations to help eliminate the predictability of their occurrence. Interviews with random staff reflect their awareness of policy prohibiting them from notifying co-workers that said rounds are occurring. As well, interviews with random prisoners unanimously reflect that supervisors are routinely walking about the facility. During the onsite portion of the audit, it was further observed that both staff and prisoners seemed comfortable with the presence of supervisory staff within department and housing areas; thus, further supporting the fact that supervisory staff are routinely present throughout the facility.

#### Reasoning & Findings Statement:

This standard requires the facility to maintain adequate staffing levels, as well as to consider the use of monitoring technology to help fortify those levels, in order to promote the safety of not only the prisoners assigned to the facility, but also the well-being of all correctional employees, contractors, and volunteers within the compound. As an additional layer of protection, as well as to ensure meaningful and effective correctional supervision, intermediate and higher-level staff are required to routinely conduct unannounced rounds throughout the institution. The auditor observed, as well as the facility

provided, evidence of documented unannounced rounds of supervisory ranks of various levels, up to and including, the facility warden. During the audit time frame, staffing levels have fallen below the minimum requirements of the staffing plan, with all deviations being properly noted. To ensure the NCF staffing plan keeps pace with the changing nature of correctional facilities, the facility staffing plan is reviewed in coordination with the PREA Coordinator annually. As such, the NCF facility has clearly met the requirements of this standard.

## Standard 115.14: Youthful prisoners

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.14 (a)

- Does the facility place all youthful prisoners in housing units that separate them from sight, sound, and physical contact with any adult prisoners through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA

#### 115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful prisoners and adult prisoners? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful prisoners and adult prisoners have sight, sound, or physical contact? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA

#### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful prisoners in isolation to comply with this provision? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA
- Does the agency, while complying with this provision, allow youthful prisoners daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA
- Do youthful prisoners have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful prisoners [prisoners <18 years old].)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

**Does Not Meet Standard** (*Requires Corrective Action*)

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- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### **Interviews:**

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Random Staff
- Random/Targeted Prisoners

#### **Site Review Observations:**

- While conducting the onsite review, the auditor did not observe any prisoners who appeared excessively youthful.
- In reviewing prisoner documents, the auditor did not observe any birthdays to be less than 18 years before the date of the onsite review.
- All prisoners interviewed stated that they were at least 18 years of age and/or did not have any knowledge of any prisoner assigned to the NCF who was not at least 18 years of age.

#### **Standard Subsections:**

(A) Agency policy (MDOC Prison Rape Elimination Act [PREA] Manual) prohibits the placement of any prisoner less than 18 years of age in a housing unit within "sight, sound or physical contact with any adult prisoner (age 18 or older) through use of a shared dayroom or other common space, shower area or sleeping quarters." The NCF does not house any prisoners less than 18 years of age.

(B) As NCF does not house any prisoners less than 18 years of age, the facility has maintained absolute sight and sound separation between prisoners less than 18 years of age and prisoners more than 18 years of age.

(C) As NCF does not house any prisoners less than 18 years of age, unit administration has avoided placing any prisoners less than 18 years of age within isolation in order prevent said person from living within sight and sound of prisoners more than 18 years of age. Hence, the NCF has not denied any prisoners less than 18 years of age the ability to engage in daily large-muscle exercise or to participate in other programs or work opportunities due to said placement.

#### Reasoning & Findings Statement:

This standard requires that the agency ensures sight and sound separation between prisoners less than 18 years of age and prisoners more than 18 years of age. Alternatively, the standard requires that there is direct staff supervision when prisoners less than 18 years of age and prisoners more than 18 years of age have the possibility of sight, sound, or physical contact. The State of Michigan prohibits the assignment of prisoners less than 18 years of age to adult housing units. Since NCF contains only adult housing units, NCF is prohibited from receiving, and subsequently housing, prisoners less than 18 years of age. As such, the facility maintains an absolute and constant sight, sound, and physical barrier between prisoners less than 18 years of age and prisoners more than 18 years of age. This given, the NCF has met the requirements of this standard.

## Standard 115.15: Limits to cross-gender viewing and searches

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.15 (a)

- 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  No

#### 115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female prisoners, except in exigent circumstances? (N/A if the facility does not have female prisoners.)  
 Yes  No  NA
- Does the facility always refrain from restricting female prisoners' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female prisoners.)  Yes  No  NA

#### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No

- Does the facility document all cross-gender pat-down searches of female prisoners? (N/A if the facility does not have female prisoners.)  Yes  No  NA

#### 115.15 (d)

- Does the facility have policies that enables prisoners 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  No
- Does the facility have procedures that enables prisoners 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  No
- Does the facility require staff of the opposite gender to announce their presence when entering an prisoner housing unit?  Yes  No

#### 115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex prisoners for the sole purpose of determining the prisoner's genital status?  Yes  No
- If an prisoner's genital status is unknown, does the facility determine genital status during conversations with the prisoner, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?  Yes  No

#### 115.15 (f)

- 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  No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex prisoners in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?  Yes  No

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- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.04.110, Search and Arrest in Correctional Facilities, 11-13-23
- MDOC #04.06.184, Gender Dysphoria, 6-26-17
- MDOC Corrections Training Program, Personal Searches, January 2018
- MDOC Computer Based Training, Sexual Abuse and Sexual Harassment in Confinement, 2016
- MDOC Privacy Notice posted sign, English
- MDOC Privacy Notice posted sign, Spanish
- MDOC Knock and Announce posted sign, English
- MDOC Strip Search, Body-Cavity Search, Cross-Gender Search Report form, 10/23
- MDOC Custody and Security in Corrections, Training Slides, Part 2,
- Michigan Code of Criminal Procedure (Excerpt), Act 175 of 1927, 764.25b Body cavity search, 2016
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF #04.04.110, Search and Arrest of Prisoners, Employees and Visitors, 2-19-25
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Corrective Action and/or Refresher Training, Standard 115.15 Limits to Cross-Gender Viewing and Searches, October 2025
- NCF Photo of Mirror Added in Laundry Room

### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Random Prisoners
- Prisoners Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex

### Site Review Observations:

- During the onsite inspection, staff were routinely observed making cross-gender announcements when persons of the opposite gender entered prisoner housing areas.
- Supervisory staff were observed conducting their routine security checks within prisoner housing areas. Cross-gender announcements and supervisory rounds, both unannounced rounds and scheduled rounds, were subsequently documented on chronological activity logs.

- Privacy shields were in place inhibiting view into all prisoner toilets.
- Privacy shields were observed and/or available in medical examination rooms.
- Privacy curtains were observed in all shower areas.
- Video surveillance was not trained to areas where prisoners might routinely be in a state of undress.

Standard Subsections:

- (A) Agency policy (04.04.110) prohibits staff from conducting “cross-gender strip or full-body scanner searches of any prisoners, including a prisoner with a search accommodation, except in exigent circumstances.” Per the NCF PCM, during the audit time frame, there have not been any cross-gender strip or cross-gender visual body cavity searches conducted. Random staff interviews confirm that staff do not conduct such searches. As well, interviews with random prisoners did not suggest that staff have conducted cross-gender strip or visual body cavity searches.
- (B) The NCF is a male facility. Interviews with random staff confirm adherence to agency policy (04.04.110) prohibiting “cross-gender pat-down or clothed-body searches of female prisoners, including a prisoner who identifies as females with a search accommodation, except in exigent circumstances.” As well, interviews with prisoners reflect that the facility has never denied any female prisoner access to a regularly available program or out of cell activity due to an inability to conduct same-gender searches of prisoners.
- (C) Agency policy (04.04.110) requires that the institution shall document all cross-gender strip searches, cross-gender visual body cavity searches and all cross-gender pat down searches of female prisoners and visual body cavity searches on a Strip Search/Body Cavity Search/Cross Gender Search Form. While staff at the facility have not engaged any (0) cross-gender strip searches of its prisoners during the audit time frame, all random staff interviewed understood that under exigent circumstances, should the need arise, such searches would require justification. As well, since the NCF does not house female prisoners, no females have ever been subject to a cross-gender search.
- (D) The agency has a policy (03.03.140) in place that allows prisoners “to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing the prisoner’s breasts, buttocks or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks.” Random staff interviewed confirmed adherence to agency’s opposite gender announcement policy, which requires that all employees, contractors, and volunteers of the opposite-gender to make an announcement that an opposite gender individual has entered the housing unit. When interviewed, all opposite-gender staff confirmed their routine use of opposite gender announcements. However, a significant number of prisoners interviewed stated that opposite gender staff do not routinely make such announcements. To ensure staff compliance, additional training was provided to all NCF staff to remind all personnel of this agency requirement. During the facility onsite review, modesty barriers and curtains were in place to inhibit the viewing of any prisoner in a state of undress. Lastly, a review of the facility’s video surveillance found that cameras were not trained to areas where prisoners might routinely be in a state of undress.

- (E) Agency policy (04.04.110) mandates that staff will not search or physically examine a transgender or intersex prisoner for the sole purpose of determining the prisoner's genital status. Rather, if the genital status is unknown, it may be determined through conversations with the prisoner or by reviewing medical records. If staff members are unable to determine the prisoner's genital status, the prisoner shall be referred to medical for a broader medical examination conducted in private by a medical practitioner. In interviewing random staff, it was clearly expressed that if the gender of a prisoner is unknown, conducting a strip search to determine the genital status would be inappropriate. Rather, random staff generally expressed that to determine gender they would contact the medical department, their supervisor, refer to agency records, or simply ask the prisoner.
- (F) Agency policy (MDOC Corrections Training Program) requires that all staff are trained on how to conduct cross-gender pat-down searches, as well as searches of transgender and intersex prisoners. Agency policy (04.04.110) provides clear instructions on how staff will perform searches of any prisoner, to include transgender persons. Facility records reflect that 100% of NCF security staff have been trained on conducting said searches in a professional and least intrusive manner as possible consistent with security needs. During interviews, all random staff affirmed their obligation to conduct searches in a professional manner and only for security purposes.

#### Reasoning & Findings Statement:

This standard requires that an agency place limits on cross-gender strip and visual body cavity searches. Accordingly, the agency has enacted policies prohibiting said searches in the absence of exigent circumstances. If exigent circumstances arise that require staff to engage in cross-gender strip or visual body cavity searches, policy subsequently requires these searches to be properly documented. It should be noted, however, that during the audit time frame, the NCF has not engaged any opposite-gender strip or visual body cavity searches. Facility records reflect that all security staff have been trained on the proper procedures for conducting pat searches on transgender or intersex prisoners, which require said searches to be performed in a professional and least intrusive manner as possible. An extensive review of live video surveillance demonstrates that cameras are not trained in areas where prisoners would routinely be in a state of undress. Agency policy requires that opposite gender staff announce their presence when entering areas where prisoners may be in a state of undress. Interviews with random staff confirmed adherence to said policy. As well, during the onsite portion of the audit process, this announcement was routinely observed as opposite gender staff entered all housing areas, as well as other areas that might contain prisoners in any state of undress. However, interviews with random prisoners suggested that said staff do not perform opposite gender announcements as required. To ensure staff compliance, additional training was provided to all NCF staff to remind all personnel of this agency requirement. Lastly, during the facility onsite review, modesty barriers and curtains were in place to inhibit the viewing of any prisoner in a state of undress. As such, the NCF has met all requirements of this standard.

## Standard 115.16: Prisoners with disabilities and prisoners who are limited English proficient

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

## 115.16 (a)

- Does the agency take appropriate steps to ensure that prisoners 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: prisoners who are deaf or hard of hearing?  Yes  No
- Does the agency take appropriate steps to ensure that prisoners 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: prisoners who are blind or have low vision?  Yes  No
- Does the agency take appropriate steps to ensure that prisoners 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: prisoners who have intellectual disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that prisoners 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: prisoners who have psychiatric disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that prisoners 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: prisoners who have speech disabilities?  Yes  No
- Does the agency take appropriate steps to ensure that prisoners 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  No
- Do such steps include, when necessary, ensuring effective communication with prisoners who are deaf or hard of hearing?  Yes  No
- 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  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with prisoners with disabilities including prisoners who: Have intellectual disabilities?  Yes  No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with prisoners with disabilities including prisoners who: Have limited reading skills?  Yes  No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with prisoners with disabilities including prisoners who: Are blind or have low vision?  Yes  No

#### 115.16 (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 prisoners who are limited English proficient?  Yes  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

#### 115.16 (c)

- Does the agency always refrain from relying on prisoner interpreters, prisoner readers, or other types of prisoner assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the prisoner's safety, the performance of first-response duties under §115.64, or the investigation of the prisoner's allegations?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.06.156, Deaf and/or Hard of Hearing Prisoners, 5-1-21
- MDOC Identifying and Addressing Sexual Abuse and Sexual Harassment, A Guide for Prisoners, Braille, 3-4-15
- MDOC Oral Interpretation and Document Translation Contract, Expiration: 9-12-23, 9-12-26

- MDOC Instructions for Accessing Telephonic Interpreting
- MDOC Prisoner Guidebook, English, June 2014
- MDOC Prisoner Guidebook, PREA Section, English, March 2024
- MDOC An Inside Line poster, English, 2023
- MDOC An Inside Line poster, Spanish, 2023
- MDOC Zero Tolerance Policy, Trifold Brochure, English, 8-19-22
- MDOC Zero Tolerance Policy, Trifold Brochure, Spanish, 8-19-22
- MDOC Sexual Abuse Poster, English
- MDOC Sexual Abuse Poster, Spanish
- MDOC Privacy Notice posted sign, English
- MDOC Privacy Notice posted sign, Spanish
- MDOC PREA Notice, Limitations to Confidentiality, English
- MDOC PREA Notice, Limitations to Confidentiality, Spanish
- MDOC PREA Risk Screening Form, Spanish, 9/20
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Staff Translator Accommodation List: 10-29-25
- NCF PREA Prisoner Information Verification-72 Hour, Spanish: 10-29-25a, 10-29-25b, 10-29-25c
- NCF PREA Prisoner Information Verification-30 Day, Spanish: 10-29-25a, 10-29-25b, 10-29-25c

#### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Prisoners with Disabilities
- Prisoners with Limited English Proficiency

#### Site Review Observations:

- Correctional staff assigned to housing areas entered each area within the building to loudly announce information, to include when opposite gender staff entered the housing area.
- PREA Notices, as well as other advisement notices, were posted in languages spoken by significant portions of the prisoner population; namely English and Spanish.
- PREA information is also available in braille.
- Language Line services are available as needed.
- Staff translators are also available if needed.

#### Standard Subsections:

- (A) The MDOC has developed agency-wide policies (MDOC Prison Rape Elimination Act (PREA) Manual, MDOC #03.03.140, MDOC #04.06.156) to enhance communication efforts with disabled prisoners; such as those with hearing, vision, speech, or other physical disabilities;

psychiatric or other intellectual disabilities, or those with limited English proficiency; so as to provide said prisoners with 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. PREA educational information is provided in writing, verbally, as well as presented in video format (available in English and Spanish). The NCF also has access to Language Line Services, which can be used to translate PREA, as well other confidential information.

When interviewing staff, employees were aware of the need to obtain staff interpreters for sensitive security matters, such as PREA related investigations. All staff were aware that other prisoners could not be used to translate for any prisoner during a sexual abuse or sexual harassment investigation or incident. During the audit time frame, there have not been any (0) instances of NCF using prisoner interpreters for PREA related matters. Prisoners with physical and/or intellectual disabilities were interviewed. These persons all stated that their disabilities did not prevent them from participating in any facility-based services or that NCF has made accommodations for their disabilities, to include making accommodations for the agency's responsibility in preventing, detecting, and responding to instances of sexual abuse and sexual harassment.

- (B) The agency has taken reasonable steps to ensure meaningful access to all aspects of the agency's effort to prevent, detect, and respond to sexual abuse and sexual harassment of prisoners who have limited English proficiency, to include access to qualified interpreters for effective translations. The PREA informational brochure is printed in two different languages: English and Spanish. As well, per the PREA Coordinator, the PREA Informational video can be seen by prisoners in those languages. As needed, Language Line Services can also be used to translate PREA information into other languages. Additionally, the agency has produced the *Identifying and Addressing Sexual Abuse and Sexual Harassment, A Guide for Prisoners* manual in braille to assist those prisoners with limited vision.
- (C) The agency does not rely on prisoners to interpreter, read, or otherwise provide assistance to other prisoners in response to allegations of sexual abuse or sexual harassment. Rather, the MDOC has developed agency-wide policies that prohibit the use of prisoner interpreters or other types of prisoner-based assistance in the transmission or subsequent investigation of security sensitive information, such as PREA related matters (MDOC Prison Rape Elimination Act (PREA) Manual). The agency has also developed agency-wide policies to enhance communication efforts with disabled prisoners; such as those with hearing, vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities, or those with limited English proficiency (MDOC #04.06.156); so as to provide said prisoners with an equal opportunity to directly participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment without the use of prisoner interpreters or other types of prisoner-based assistance. As articulated during random staff interviews, NCF staff are aware of these agency policies and do not utilize prisoner interpreters for security sensitive matters. During the audit time frame, the NCF has not used any (0) prisoners as interpreters for other prisons for security sensitive matters.

#### Reasoning & Findings Statement:

This standard empowers all prisoners with the ability to access the PREA program, as well as to redress government in light of claims of sexual abuse and sexual harassment. An essential component to that requirement is the ability to access PREA information, services, and support services. Prisoners with disabilities; either cognitive, physical, or cultural, may require additional assistance in achieving said access. Hence, it is necessary for the agency to provide additional measures to ensure said prisoners have equal access. The MDOC recognizes this need and has created policies to address it. The NCF maintains sufficient stocks of PREA informational brochures in both English and Spanish. The NCF routinely stocks PREA informational brochures, as well as shows PREA informational videos in English, as well as Spanish, the most commonly spoken language inside of NCF outside of English. Additionally, the NCF offers a listing of other types of resources available to prisoners, as well as contact information for those resources, in both English and Spanish. Lastly, it should be noted that at no time within the audit time frame, has NCF used prisoner interpreters to help agency staff communicate with other prisoners regarding security sensitive information. Rather, when needed, staff commonly use staff interpreters or a language assistance phone line for communication with prisoners who have limited English proficiency. As such, the NCF has met the requirements of this standard.

## Standard 115.17: Hiring and promotion decisions

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with prisoners 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  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with prisoners 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  No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with prisoners who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with prisoners 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  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with prisoners 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  No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with prisoners who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above?  Yes  No

#### 115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with prisoners?  Yes  No
- Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with prisoners?  Yes  No

#### 115.17 (c)

- Before hiring new employees, who may have contact with prisoners, does the agency perform a criminal background records check?  Yes  No
- Before hiring new employees who may have contact with prisoners, 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  No

#### 115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with prisoners?  Yes  No

#### 115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with prisoners or have in place a system for otherwise capturing such information for current employees?  Yes  No

#### 115.17 (f)

- Does the agency ask all applicants and employees who may have contact with prisoners directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?  Yes  No
- Does the agency ask all applicants and employees who may have contact with prisoners 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  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

#### 115.17 (h)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.06.111, Employment Screening, 3-28-22
- MDOC Corrections Supervisor Application Questions
- MDOC PREA Background Questionnaire form, 7-6-23
- MDOC Corrections Recruitment, Correctional Officer Job Posting, 6-7-14
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Employee Status Change, 9-1-24
- NCF Authorization for Release of Information & Verification of Employment: 4-21-25
- NCF PREA Background: 3-17-25, 6-23-25
- NCF Contractor LEIN Checks, 2024

#### Interviews:

- Administrative (Human Resources) Staff
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager

## Site Review Observations:

- Review of 6 employee/contractor files onsite for required PREA/criminal background documentation.
- Review of NCF employee PREA training and LEIN tracking spreadsheet

## Standard Subsections:

- (A) The NCF has developed agency-wide policies (#02.06.111) that prohibit the hiring or promotion of employees and contracted workers who have engaged in sexual abuse, been convicted of engaging or attempting to engage in a sexual activity with prisoners, or have been civilly or administratively adjudicated to have engaged in a sexual activity with prisoners while in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency also has policies that stipulate prior to all hiring and promotional decisions of employees and contract workers, any incidents of sexual harassment will be considered. Prior to hiring any new employee or contract worker at the facility level, NCF Human Resource staff ensure that criminal background checks have been conducted on the prospective employee. As well, as required by policy, MDOC/NCF Human Resource staff ensure that all previous institutions of employment are contacted to determine if candidates have any previously substantiated claims of sexual abuse or resigned during a pending investigation of such claims. Conversely, policy also requires that the MDOC cooperates with other correctional and law enforcement agencies to ensure that accurate information regarding PREA related employment laws are effectively shared between agencies.
- (B) NCF policy (#02.06.111) requires the facility to consider any incidents of sexual harassment in determining whether to hire/promote anyone who may have contact with prisoners. Likewise, in speaking with the NCF Human Resource representative, agency policy requires Human Resource staff to also verify contractor employment history.
- (C) Before hiring or promoting employees, policy (MDOC Prison Rape Elimination Act (PREA) Manual, #02.06.111) requires the agency to perform criminal background checks. Policy (#02.06.111) also requires the agency to conduct checks with prior employers for any applicant previously employed by a correctional facility. Within the audit time frame, NCF has hired 37 persons who may have contact with prisoners. All such persons received a criminal records background check.
- (D) Agency policy requires that prior to enlisting the services of any contractors who may have contact with prisoners, the agency performs criminal background records checks on said contractors. Within the past twelve months, the NCF has required 19 contracts for services where criminal background record checks were conducted on all persons covered in the contract who might have contact with prisoners. An examination of NCF's current employee/contractor background spreadsheet, as well as random checks of employee/contractor files, reflect that all persons contracted with the NCF have received an initial background check, as well as, where applicable, required subsequent checks within the required time frame.
- (E) Once employed, agency policy (MDOC Prison Rape Elimination Act (PREA) Manual, #02.06.111) requires that criminal background checks are conducted every three years to ensure

that said persons have not been found to have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. As well, per NCF HR Staff, employees have an affirmative duty to report any contact they may have had with other law enforcement agencies and to report any sexual misconduct they may have been found guilty of at any other institution. Furthermore, employees are made aware that failing to provide this information, or providing false information regarding sexual misconduct, is grounds for employee discipline, to include termination of employment. A review of NCF's current employee/contractor background spreadsheet reflects that all persons working at the NCF have received their initial criminal background check, as well as, where applicable, required subsequent checks within the required time frame.

(F) Per NCF HR staff, all applicants, as well as current employees, are required to submit a PREA Background Questionnaire form. This document directly asks employees who may have contact with prisoners to disclose any previous sexual misconduct that may have occurred in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. Additionally, the NCF does impose a continuing affirmative duty on all employees to disclose any misconduct found within Section A of this standard. Review of documentation specific to NCF confirms the facility's adherence to said policies.

(G) Agency policy (MDOC Prison Rape Elimination Act (PREA) Manual, #02.06.111) expressly advises employees that material omissions or providing false information regarding the aforementioned misconduct is grounds for termination.

(H) Agency policy allows that unless prohibited by law, the NCF shall 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 (MDOC Prison Rape Elimination Act (PREA) Manual, #02.06.111).

#### Reasoning & Findings Statement:

This standard requires the agency to consider the sexual safety of prisoners in all hiring and promotion decisions within the agency. The agency has numerous policies in place to ensure that end. As well, the NCF Human Resource Department has developed standardized tracking methods to ensure timely reviews, and subsequent reviews, of applicants and continuing employees\contractors are conducted as required. Review of employee and contractor training files reflect that the NCF Human Resource Department complies with agency policy. As such, the NCF clearly meets the requirements of this standard.

## Standard 115.18: Upgrades to facilities and technologies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.18 (a)

- 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 prisoners 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  No  NA

### 115.18 (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 prisoners 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Prison Rape Elimination Act (PREA) Annual Staffing Plan Review: 7-30-24, 4-29-25
- NCF Asset Change Request, nd

#### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager

Site Review Observations:

- Observed video monitoring technologies present within the facility.
- Reviewed live video surveillance across the facility.

Standard Subsections:

- (A) Per the NCF Warden, the NCF has **not** acquired a new facility since the last PREA audit. Also, the facility has **not** made any substantial modifications to the existing facility since the last PREA audit. However, as noted by the NCF Warden, if should modifications were made, the facility would consider the effect of these modifications upon the facility’s ability to protect prisoners from sexual abuse during the modification process.
- (B) The NCF **has updated** the video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit. **Specifically, the facility is in the process of adding additional cameras.** As noted by the NCF Warden, in doing this, the facility did consider how the use of such technology could enhance prisoner protection from sexual abuse.

Reasoning & Findings Statement:

Within the audit time frame, NCF has **not** made substantial modifications of the existing facility. It **has**, however, enhanced its video monitoring system. As a function of its annual staffing review, the NCF does consider, among other factors, generally accepted correctional practices and the use of video monitoring technologies. Currently, the NCF has numerous cameras that provide sufficient coverage throughout the institution. In all facility designs and staffing decisions, as well as decisions involving the use of video monitoring technology, the NCF has sought to maximize the facility's ability to protect prisoners from sexual abuse. As such, the NCF has met the requirements of this standard.

## RESPONSIVE PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.21 (a)

- 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    No    NA

#### 115.21 (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  No  NA
- 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  No  NA

#### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether onsite or at an outside facility, without financial cost, where evidentiary or medically appropriate?  Yes  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- 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  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

#### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.)  Yes  No  NA
- Has the agency documented its efforts to secure services from rape crisis centers?  Yes  No

#### 115.21 (e)

- 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  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- 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  No  NA

### 115.21 (g)

- Auditor is not required to audit this provision.

### 115.21 (h)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #03.04.100, Health Services, 3-10-25
- MDOC Crime Scene Management and Preservation, 2015 In-Service Training Trainers Manual, August 2014
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-14-19

- MDOC Prison Rape Elimination Act (PREA) Forensic Examination Completed at Outside Hospital form, 12/13
- MDOC PREA Sexual Abuse Investigation Worksheet form, 12/13
- MDOC Prison Rape Elimination Act (PREA) Sexual Abuse Investigation Worksheet, 12/13
- MDOC MOU Just Detention International, through 9-30-26
- MDOC MOU Diane Pepler Resource Center, 7-21-25
- MDOC Victim Advocate Training, 5-14-25
- MDOC Victim Advocates Memorandum, 11-28-16
- Department of Michigan State Police, Memo of PREA Assurance, 9-30-15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF #03.04.100, Health Services, 3-24-24
- NCF VAT Online Specific Considerations, Incarcerated Victims of Sexual Violence Course Completion Acknowledgement: 8-21-23a, 8-21-23b
- NCF Office for Victims of Crime Training & Technical Assistance Center, VAT Online Core Competencies and Skills Advocacy Certificate: 8-28-23
- NCF VAT Trained Staff, 11-20-25
- NCF PREA Investigation Tracker: 2024, 2025
- NCF PREA Forensic Examination Completed at Outside Hospital, 2-12-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Random Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel
- Community-Based Victim Advocacy Staff
- Prisoners Who Reported Sexual Abuse

#### Site Review Observations:

- Observed Medical Department and privacy screens/limitations.
- Observed interview rooms and protocol for confidential interviews.
- Reviewed investigative files.

#### Standard Subsections:

- (A) Agency policy (MDOC Prison Rape Elimination Act (PREA) Manual) mandates that the Department of Michigan State Police (MSP) is responsible for investigating criminal allegations of sexual abuse. In this, policy asks that the MSP follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative procedures and criminal prosecutions.

- (B) As the NCF does not house youth, it is not necessary to utilize a developmentally appropriate youth protocol. NCF policy does, however, still require the agency to utilize the U.S. Department of Justice's Office on Violence Against Women protocol; namely, *A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents* as the evidence collection protocol manual. In this, the MOU in force with the MSP does ensure that said protocol will be used for investigating criminal allegations of sexual abuse in MDOC prisons.
- (C) In accordance with agency protocol, the NCF does ensure that all prisoners are given access to forensic medical examinations without cost (03.04.100). These exams are performed at an outside facility by qualified SAFE/SANE nursing staff. As SAFE/SANE staff are either on duty or on call 24 hours a day, seven days a week, the examination will always be performed by a qualified medical practitioner. The facility utilizes **Helen Newberry Joy Hospital & Healthcare Center** for forensic exams. Within the audit time frame, the NCF has cause to facilitate **one (1)** such exam.
- (D) The agency does attempt to make a victim's advocate available for prisoner support. In this, the facility has developed corporative care with **Just Detention International**, as well as the **Diane Pepler Resource Center** to provide advocacy services via telephone or in-person. Additionally, the facility has trained unit staff to serve in this role if persons from the advocacy service are not available. A review of facility documentation reflects staff have been trained as victim advocates.
- (E) In accordance with policy (03.04.100), and as requested by the victim, a local rape crisis center advocate or qualified staff member may remain with the prisoner through the forensic medical examination process and investigatory interviews. As requested, this person may provide emotional support, crisis intervention, information, and referrals. For forensic exams, the facility utilizes the **Helen Newberry Joy Hospital & Healthcare Center**.
- (F) Agency policy (03.03.140) mandates that the Department of Michigan State Police (MSP) is responsible for investigating criminal allegations of sexual abuse. To this effect, NCF policy does ask that MSP utilize the U.S. Department of Justice's Office on Violence Against Women protocol; namely, *A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents* as the evidence collection protocol manual.
- (G) The auditor is not required to audit this provision.
- (H) Only qualified staff members may serve as victims' advocates. All relevant staff have been appropriately screened and trained for that purpose. Through corporative care with **Just Detention International**, the **Diane Pepler Resource Center**, as well as through the use of its own **trained staff**, the agency has ensured that all persons who have contact with NCF prisoners have been appropriately screened and trained, along with having received education concerning sexual assault and forensic examination issues in general.

#### Reasoning & Findings Statement:

This standard concerns evidence protocol and forensic medical examinations. The NCF has policies in place to ensure proper accountability during evidence collection and the forensic exam process. During the audit time frame, the NCF has been required to initiate the evidence protocol and forensic medical examination **once (1)**. As evidenced during the interview process, facility staff are very much aware of the policies and have standard practices in place to ensure the proper flow of the evidence collection process. **The NCF has a MOU with the Diane Pepler Resource Center** to provide **victim advocacy services during the forensic evidence collection process**, along as when otherwise needed by prisoners. As well, the NCF **and Just Detention International** have developed a corporative care process to ensure that prisoners are provided appropriate referrals to a local victim's advocates as needed. As such, the NCF has met the requirements of this standard.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.22 (a)**

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

#### **115.22 (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  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

#### **115.22 (c)**

- 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  No  NA

#### **115.22 (d)**

- Auditor is not required to audit this provision.

#### **115.22 (e)**

- Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #01.01.140, Internal Affairs, 7-1-18
- MDOC Policy Directives, Web Page Internal Affairs Policy, 6-27-22
- MDOC Policy Directives, Web Page PREA Policy, 6-27-22
- MDOC Policy Directives Listing on Agency Website, 8-23-24
- Department of Michigan State Police, Memo of PREA Assurance, 9-30-15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel
- Community-Based Victim Advocacy Staff
- Prisoners Who Reported Sexual Abuse

### Site Review Observations:

- Observed Medical Department and privacy screens/limitations.
- Observed interview rooms and protocol for confidential interviews.

- Reviewed investigative files.
- Reviewed agency website.

Standard Subsections:

- (A) Policy (MDOC Prison Rape Elimination Act (PREA) Manual, MDOC #03.03.140, MDOC #01.01.140, NCF #03.03.140) requires that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. Within the audit time frame, the NCF has received **thirteen (13)** allegations of sexual abuse and sexual harassment. As noted by NCF Investigative staff, all allegations of sexual abuse and sexual harassment are investigated for criminal and administrative findings. Of the **thirteen (13) allegations received, all thirteen (13) were referred to a** law enforcement agency for continued review. An onsite site review of **eleven (11)** investigative files reflects that said investigations are conducted in a thorough and objective manner.
- (B) The NCF refers all allegations of sexual abuse and sexual harassment that appear to be criminal to the MSP, an external law enforcement agency with legal authority to conduct criminal investigations. The NCF has published this policy, as well as the criminal investigation process, on the agency website. All referrals to the Michigan State Police (MSP) are documented by the agency.
- (C) In accordance with MDOC #03.03.140, “any allegations(s) that appear to be criminal shall be referred to the MSP or other appropriate law enforcement agency to be criminally investigation and referred for prosecution. The Department investigation shall be coordinated as necessary with the investigation law enforcement agency to ensure the Department’s efforts will not be an obstacle for prosecution.”
- (D) As noted by the Department of Michigan State Police, the agency does have a policy in place to govern the conduct of said investigations. Within said policy, the MSP has incorporated the requirements of the PREA standards when conducting investigations within a confinement setting. As such, the MSP does have a policy in place, complete with evidence protocol, for conducting said investigations.
- (E) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard ensures that proper referrals of allegations are made for further investigations by an agency with proper authority to conduct criminal investigations. The NCF does have appropriate policies in place mandating referrals in specific instances. Within the audit time frame, the NCF has referred all required allegations of sexual abuse and sexual harassment that it has received to the MSP. In interviewing NCF investigative staff, it is clear that NCF staff refer all required investigations to MSP for further processing in accordance with policy. As such, the NCF complies in all material ways with this standard for the relevant review period.

# TRAINING AND EDUCATION

## Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.31 (a)

- Does the agency train all employees who may have contact with prisoners on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with prisoners on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?  Yes  No
- Does the agency train all employees who may have contact with prisoners on prisoners' right to be free from sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with prisoners on the right of prisoners and employees to be free from retaliation for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency train all employees who may have contact with prisoners on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with prisoners on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- Does the agency train all employees who may have contact with prisoners on how to detect and respond to signs of threatened and actual sexual abuse?  Yes  No
- Does the agency train all employees who may have contact with prisoners on how to avoid inappropriate relationships with prisoners?  Yes  No
- Does the agency train all employees who may have contact with prisoners on how to communicate effectively and professionally with prisoners, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming prisoners?  Yes  No
- Does the agency train all employees who may have contact with prisoners on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?  Yes  No

### 115.31 (b)

- Is such training tailored to the gender of the prisoners at the employee's facility?  Yes  No
- Have employees received additional training if reassigned from a facility that houses only male prisoners to a facility that houses only female prisoners, or vice versa?  Yes  No

### 115.31 (c)

- Have all current employees who may have contact with prisoners received such training?  
 Yes  No
- 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  No
- 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  No

### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC Training Division, Training Plan: 4-19-22
- MDOC PREA All Employees Course Quiz Questions, 2021-2022
- National PREA Resource Center, PREA Training, Part 1-10, 2022
- National Institute of Corrections, Training Division, Female Offenders
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Administrative (Human Resources) Staff
- Random Staff

Site Review Observations:

- Random review of employee files, as well as matched review of employee files to employees interviewed, to confirm documentation of required PREA training.

Standard Subsections:

- (A) Policy (MDOC Prison Rape Elimination Act (PREA) Manual, MDOC #03.03.140) requires all employees to be fully trained on the agency's zero-tolerance policy for sexual abuse and sexual harassment. As verified by Human Resource staff, such training is initially performed as a function of the hiring process. This PREA Resource Center PREA Training is a comprehensive analysis of the PREA standards, as well as its subsequent application in a confinement setting. A review of training curriculum for this class reflects the agency's zero-tolerance policy for sexual abuse and sexual harassment, and discussion on how employees may fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. Employees are also informed that prisoners have a right to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting said abuse and harassment, the dynamics of sexual abuse/harassment, reactions to sexual abuse/harassment, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with prisoners, how to comply with relevant mandatory reporting laws specific to reporting abuse to outside authorities, and how to communicate effectively and professionally with prisoners; including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming prisoners. During random staff interviews, all employees confirmed receipt of said training. A random review of employee PREA training confirmed receipt of said training for all employee files reviewed.
- (B) Training curriculum reviews demonstrate that the material is appropriate for the gender of prisoners at the employees' facility. As well, agency policy (03.03.140) requires that the agency develops training specific to the gender of the prisoners being incarcerated, as well as transgender prisoners. Per the PCM, during the audit time frame, the NCF has not had any (0) employees reassigned from facilities housing opposite gender prisoners. As such, all staff assigned to the NCF have received training appropriate for the gender of prisoners incarcerated within the facility.
- (C) A review of NCF PREA Training Completion Report reflects that all actively employed staff have received their initial PREA training, as well as continued training as appropriate based on agency policy (03.03.140). Following this initial training, subsequent refresher trainings are provided to staff at mandatory time intervals; specifically, their annual In-Service Training. A review of the NCF annual PREA Training Completion Report reflects continuing training schedules have all been maintained.

(D) In accordance with policy (MDOC Prison Rape Elimination Act (PREA) Manual), “the Department shall document through an employee signature or electronic verification that employees receive and understood the training.” As verified by NCF HR Staff, all active NCF staff have received required training, which has been documented upon completion of their training curriculum.

Reasoning & Findings Statement:

This standard relates to employee training. The agency has clearly established training expectations and well-developed training curriculums. NCF maintains compliance with those imperatives with 100% of all active staff having received PREA training within the required time frame. All training is documented upon completion, with NCF maintaining an overall master list of all staff having completed said training. During staff interviews, all employees affirmed their having received significant amounts of training as related to the PREA standards. When asked the series of questions noted within Subsection A of this standard, all staff knew and understood their responsibilities within the agency’s zero-tolerance policy. As such, NCF has clearly met the requirements of this standard.

## Standard 115.32: Volunteer and contractor training

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with prisoners have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures?  Yes  No

#### 115.32 (b)

- Have all volunteers and contractors who have contact with prisoners 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 prisoners)?  Yes  No

#### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

**Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #03.02.105, Volunteer Services and Programs, 5-26-15
- MDOC Program A, Correctional Facilities Administration Security Regulations, New Employees, Contractors, and Volunteer Training, September, 2019
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF List of Volunteers & Contractors, 9-10-25
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Individual Training Program Report, PREA, Volunteers: 9-21-22, 10-25-22, 5-22-23, 12-4-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Administrative (Human Resources) Staff
- Medical Staff
- Mental Health Staff
- Contractors Who May Have Contact with Prisoners
- Volunteers Who May Have Contact with Prisoners

#### Site Review Observations:

- Review of volunteer and contractor training forms.

#### Standard Subsections:

(A) Policy (MDOC #03.02.105) requires that “volunteers and contractors, who have contact with inmates, shall be trained on their responsibilities under the Department’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures.” At the time of the audit, the NCF has had 42 volunteers and contract workers present in the facility within the audit time frame who could have had contact with prisoners. As affirmed by the PREA Coordinator, 100% of those persons have received appropriate PREA training, dependent on their level of

contact with prisoners, prior to their entrance into the facility. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation. Additionally, when interviewed, volunteers and contract workers confirmed their receipt of required PREA training.

(B) As affirmed by the PREA Coordinator, all volunteers and contract workers assigned to the NCF have received PREA training appropriate for their role on the facility. When interviewed, both volunteers and contract workers all stated that they had been made aware of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. They further stated that if the need arose, they could report an incident of sexual abuse or sexual harassment to their supervisor or a security staff member. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation.

(C) Volunteers and contractors are required to receive PREA training prior to working/volunteering within the facility. After receipt of training, contractors and volunteers sign an acknowledgement form indicating the date and that they understood the training that they had received. The facility then maintains a copy of all training files belonging to both volunteers and contractors. When asked, volunteers and contract workers all confirmed that they had received PREA training prior to their actual start date with the agency. Volunteer and contractor files were randomly reviewed onsite for receipt of required training documentation.

#### Reasoning & Findings Statement:

The agency requires all volunteers and contractors to receive formal training on the agency's zero-tolerance policy for sexual abuse and sexual harassment. In this, volunteers and contractors must be provided sufficient notice of the agency's zero-tolerance policy of sexual abuse and sexual harassment. As well, said persons must be informed of how to report any knowledge they may have regarding such abuse. Lastly, the standard requires that the agency maintain appropriate training records to verify that volunteers and contractors understood the training that they had received. As with employee training, the NCF has ensured both volunteers and contractors conducting business on the facility have received required PREA trainings, as well as maintained documentation of those trainings. In speaking with volunteers and contractors, all persons stated that they have received PREA training. They further noted their understanding of the nature of the PREA, along with their own roles within it. Lastly, all volunteers and contractors interviewed were also able to articulate their responsibilities within the zero-tolerance policy specific to reporting acts of sexual abuse and sexual harassment. As such, NCF has met the requirements of this standard.

## Standard 115.33: Prisoner education

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.33 (a)

- During intake, do prisoners receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No

- During intake, do prisoners receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

#### 115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to prisoners either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to prisoners either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?  Yes  No
- Within 30 days of intake, does the agency provide comprehensive education to prisoners either in person or through video regarding: Agency policies and procedures for responding to such incidents?  Yes  No

#### 115.33 (c)

- Have all prisoners received the comprehensive education referenced in 115.33(b)?  Yes  No
- Do prisoners receive education upon transfer to a different facility to the extent that the policies and procedures of the prisoner's new facility differ from those of the previous facility?  Yes  No

#### 115.33 (d)

- Does the agency provide prisoner education in formats accessible to all prisoners including those who are limited English proficient?  Yes  No
- Does the agency provide prisoner education in formats accessible to all prisoners including those who are deaf?  Yes  No
- Does the agency provide prisoner education in formats accessible to all prisoners including those who are visually impaired?  Yes  No
- Does the agency provide prisoner education in formats accessible to all prisoners including those who are otherwise disabled?  Yes  No
- Does the agency provide prisoner education in formats accessible to all prisoners including those who have limited reading skills?  Yes  No

#### 115.33 (e)

- Does the agency maintain documentation of prisoner participation in these education sessions?  Yes  No

#### 115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to prisoners through posters, prisoner handbooks, or other written formats?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.01.105, Reception Facility Services, 10-1-19
- MDOC #04.01.140, Prisoner Orientation, 5-30-22
- MDOC #04.06.156, Deaf and/or Hard of Hearing Prisoners, 5-1-21
- MDOC Identifying and Addressing Sexual Abuse and Sexual Harassment, A Guide for Prisoners, Braille, 3-4-15
- MDOC PREA Prisoner Information Verficiation-72 Hour, English, 9/20
- MDOC PREA Prisoner Information Verficiation-72 Hour, Spanish, 9/20
- MDOC PREA Prisoner Information Verficiation-30 Day, English, 9/20
- MDOC PREA Prisoner Information Verficiation-30 Day, Spanish, 9/20
- MDOC Inmate Education Memo, 1-15-20
- MDOC Memo, Language Services, 7-20-15
- MDOC Prisoner Guidebook, English, June 2014
- MDOC An Inside Line poster, English, 2023
- MDOC An Inside Line poster, Spanish, 2023
- MDOC Zero Tolerance Policy, Trifold Brochure, English, 8-19-22
- MDOC Zero Tolerance Policy, Trifold Brochure, Spanish, 8-19-22
- MDOC Sexual Abuse Poster, English
- MDOC Sexual Abuse Poster, Spanish
- MDOC Privacy Notice, English and Spanish
- MDOC PREA Notice, Limitations to Confidentiality, English
- MDOC PREA Notice, Limitations to Confidentiality, Spanish

- MDOC PREA Verification of Information-72 Hours, English, 9/20
- MDOC PREA Verification of Information-72 Hours, Spanish, 9/20
- National PREA Resource Center, An End to Silence: Inmates' Handbook on Identifying and Addressing Sexual Abuse, September 2014
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Prisoner Guidebook, February 2025
- NCF #04.06.155, Offenders with Disabilities, 4-1-24
- NCF #04.06.156, Hard of Hearing or Deaf Prisoners, 4-29-25
- NCF #04.06.157, Braille and Talking Books Library, 4-21-25
- NCF #04.06.160, Medical Details and Special Health Accommodations, 3-29-22
- NCF Deaf and/or Hard of Hearing Prisoner List, 9-3-25
- NCF List of Inmates with GD Diagnosis, 8-6-25
- NCF List of Staff Translators, 9-4-25
- **NCF Prisoner Initial and Comprehensive Compliance Rates, 10-20-25**
- NCF Memo, PREA Education Procedures, 10-29-25
- NCF Staff Translator Accommodation List: 10-29-25
- NCF Individual Training Program Report, Institutional Training-NCF, PREA Standards 115.33 and 115.41, 11-15-25
- NCF PREA Prisoner Information Verification-72 Hour, Spanish: 10-29-25a, 10-29-25b, 10-29-25c
- NCF PREA Prisoner Information Verification-30 Day, Spanish: 10-29-25a, 10-29-25b, 10-29-25c
- NCF PREA Prisoner Information Verification-72 Hour: 2-10-20, 2-9-24, 10-14-24, 5-2-25, 5-7-25, 5-21-25, 5-30-25, 6-5-25, 6-6-25, 6-27-25a, 6-27-25b, 7-18-25, 7-23-25, 8-1-25a, 8-1-25b, 8-5-25, 8-6-25, 8-22-25, 8-27-25, 11-25-25a, 11-25-25b, 11-26-25a, 11-26-25b, 11-26-25c, 11-26-25d, 11-26-25e, 11-26-25f, 11-26-25g, 11-26-25h, 11-26-25i, 11-26-25j, 11-26-25k, 11-26-25l, 11-26-25m, 11-26-25n, 12-5-25a, 12-5-25b, 12-5-25c, 12-5-25d, 12-5-25e, 12-5-25f, 12-5-25g, 12-12-25a, 12-12-25b, 12-12-25c, 12-12-25d, 12-12-25e, 12-12-25f, 12-12-25g, 12-12-25h, 12-12-25i, 12-12-25j
- NCF PREA Prisoner Information Verification-30 Day: 3-5-24, 4-25-24, 11-13-24, 5-6-25, 6-2-25, 6-17-25, 6-25-25a, 6-25-25b, 6-30-25, 7-1-25, 7-22-25, 7-26-25, 8-6-25, 8-10-25, 8-25-25a, 8-25-25b, 9-1-25, 9-3-25
- NCF CAP Week 1, Incoming Chain, November 23-29, 2025
- NCF CAP Week 2, Incoming Chain, December 1-5, 2025
- NCF CAP Week 3, Incoming Chain, December 8-12, 2025
- NCF CAP Week 4, Incoming Chain, December 15-20, 2025
- NCF CAP Prisoner Initial and Comprehensive Compliance Rates, 1-13-25
- NCF PREA Prisoner Information Verification-72 Hour: 11-25-25a, 11-25-25b, 11-26-25a, 11-26-25b, 11-26-25c, 11-26-25d, 11-26-25e, 11-26-25f, 11-26-25g, 11-26-25h, 11-26-25i, 11-26-25j, 11-26-25k, 11-26-25l, 11-26-25m, 11-26-25n, 12-5-25a, 12-5-25b, 12-5-25c, 12-5-25d, 12-5-25e, 12-5-25f, 12-5-25g, 12-12-25a, 12-12-25b, 12-12-25c, 12-12-25d, 12-12-25e, 12-12-25f, 12-12-25g, 12-12-25h, 12-12-25i, 12-12-25j, 12-19-25a, 12-19-25b, 12-19-25c, 12-19-25d, 12-19-25e, 12-19-25f, 12-19-25g, 12-19-25h, 12-19-25i, 12-19-25j
- NCF PREA Prisoner Information Verification-30 Day: 12-12-25a, 12-12-25b, 12-12-25c, 12-12-25d, 12-15-25a, 12-15-25b, 12-15-25c, 12-15-25d, 12-17-25a, 12-17-25b, 12-17-25c, 12-17-25d, 12-17-25e, 12-17-25f, 12-19-25a, 12-19-25b, 12-30-25a, 12-30-25b, 12-30-25c, 12-30-25d, 12-

30-25e, 12-30-25f, 12-30-25g, 12-30-25h, 12-30-25i, 1-2-26, 1-5-26a, 1-5-26b, 1-5-26c, 1-5-26d, 1-5-26e, 1-5-26f, 1-5-26g, 1-6-26, 1-7-26a, 1-7-26b, 1-7-26c, 1-7-26d, 1-7-26e, 1-7-26f, 1-7-26g, 1-7-26h

#### Interviews:

- PREA Coordinator
- PREA Compliance Manager
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Prisoners

#### Site Review Observations:

- Observed the prisoner reception area.
- Observed PREA education process.
- Observed PREA informational postings in prisoner Housing, Education, Library, Law Library, and other areas of high traffic.
- Observed a variety of PREA related materials and information available for prisoner use within the facility libraries.
- Reviewed prisoner files for documentation of PREA training.

#### Standard Subsections:

(A) Policy (03.03.140, 04.01.105, 04.01.140) requires that upon receipt into the facility, prisoners shall receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Prisoners will also be informed of reporting mechanisms to expose incidents or suspicions of sexual abuse and harassment. Within the audit time frame, the NCF has received 855 prisoners during the Intake process. As noted by the PREA Compliance Manager, of those prisoners, 100% were provided the initial PREA information. However, during prisoner interviews, ten (10) of the 43 prisoners provided the opportunity to interview stated that they had not received, or did not remember receiving, PREA training. Accordingly, files for all interviewed prisoners were reviewed for their required PREA training. At that time, it was noted that only 77% of those prisons had received initial PREA information within their first 72 hours of assignment to the NCF. As such, corrective action was needed to address this deficiency. This given, corrective action was developed to ensure all prisoners are provided with information on the agency's zero-tolerance policy within 72 hours of their arrival to the facility. A review of forty-two (42) random prisoners received subsequent the implementation of this new educational process reflected that 100% of those prisoners were provided a policy overview within 72 hours of their Intake. As such, the facility has addressed this concern and no further action is necessary.

(B) As noted by Intake staff, prisoners are provided a summary of the PREA standards upon their initial arrival to the facility. Prisoners are then provided a more comprehensive training detailing key points of the process within seven days of intake. Every prisoner transferring into NCF, regardless of how long the prisoner has been incarcerated within NCF, will participate in facility orientation, including a comprehensive component on sexual abuse and sexual harassment prevention and response. Within the audit time frame, the NCF has received 813 prisoners whose

length of stay was more than thirty days. Of these, per the PREA Compliance Manager, 100% were provided a more comprehensive explanation of the PREA process. However, during prisoner interviews, eighteen (18) of the 43 prisoners provided the opportunity to interview stated that they had not received, or did not remember receiving, PREA training. Accordingly, files for all interviewed prisoners were reviewed for their required PREA training. At that time, it was noted that only 58% of those prisons had received comprehensive information of the agency's sexual abuse and sexual harassment policies during their first 30 days of assignment to the NCF. As such, corrective action was needed to address this deficiency. This given, corrective action was developed to ensure all prisoners are provided with a comprehensive explanation of the agency's zero-tolerance policy for sexual abuse and sexual harassment and its relevant processes within 30 days of Intake. A review of forty-two (42) random prisoners received subsequent the implementation of this new educational process reflected that 100% of those prisoners were provided a comprehensive education prior to the end of their first 30 days. As such, the facility has addressed this concern and no further action is necessary.

- (C) Per PREA Unit staff, as of 2013, all prisoners who were incarcerated within the MDOC received PREA training. All prisoners subsequently received into the MDOC have been required to receive PREA training upon reception. The MDOC, despite having largely consistent policies across the system, requires that a facility orientation, including a comprehension PREA education, must be provided following each transfer. As such, per policy (#04.01.140), upon any receipt to any facility within the MDOC, prisoners are again required to receive PREA training within their facility orientation process. According to the agency's PREA Coordinator, this ensures that each facility can reinforce its role in supporting the agency's zero tolerance policy toward all forms of sexual victimization. During orientation, each facility also provides local information, including identifying its PREA Compliance Manager. The PREA Compliance Manager confirms that all prisoners received at NCF are required, and have received, required PREA training.
- (D) All PREA information is provided in several alternative formats to ensure prisoners with disabilities, to include those with limited English proficiency, have equal opportunity to receive, understand, and utilize the PREA process as necessary to promote the sexual safety of all prisoners assigned to the MDOC, and more specifically, the NCF. PREA brochures and informational posters are provided in both English and Spanish, the two most common languages spoken within the NCF. Translation services are available for prisoners who don't speak English. As well, per policy (04.01.140), the agency will provide reasonable accommodations to all prisoners with a "disability, educational barrier, or language barrier" in order to "assist the prisoner in understanding the information provided during orientation" so as to ensure said prisoners have equal opportunity to benefit from the PREA provisions.
- (E) In accordance with policy (04.01.140), and confirmed by Intake Staff, at Intake, prisoners are provided with a brief PREA overview. Within 7 days of Intake, prisoners are generally provided with a more comprehensive facility orientation, to include PREA training. The information received is documented on the Prisoner Orientation Checklist, which is then acknowledged by signature by both the prisoner receiving training and the staff member providing it. The agency maintains this documentation to demonstrate that all prisoners have been made aware of their rights under the PREA program

(F) In addition to receiving information on the agency PREA policy during facility intake, prisoners assigned to the NCF also have key information from the agency/facility PREA program continuously available to them via posters, handbooks, and other written formats. Specifically, while prisoners are provided personal copies of the MDOC Prisoner Guidebook (available in English and Spanish) upon receipt into the MDOC system, this information is also made continuously available via the NCF Law Library. Hence, this material, as well as a wealth of other PREA related information, is continuously available within the facility's Law Library. Lastly, throughout the facility, as well as posted near all prisoner phones, PREA informational posters are displayed in both English and Spanish. As well, there is information regarding other valuable prisoner resources posted in each housing area for easy prisoner access.

#### Reasoning & Findings Statement:

This standard works to ensure that prisoners are cognizant of the agency's zero-tolerance policy toward sexual abuse and sexual harassment, as well as have subsequent access to, and can effectively utilize, the PREA reporting mechanism. In speaking with prisoners assigned to the NCF, all prisoners stated that they were aware of PREA and its purpose within the facility. While most prisoners were generally collectively aware of the policy and their rights to varying degrees, all prisoners interviewed were specifically aware of at least one, but generally more, methods by which they could report allegations of sexual abuse or sexual harassment. At the time of the onsite audit, however, it was noted that there was a statistically significant number of prisoners who had not received their initial or comprehensive PREA education within the required timeframes of 72 hours and 30 days, respectively. As such, corrective action was needed to address this deficiency. This given, corrective action was developed to ensure all prisoners are provided with both initial information within 72 hours of Intake, as well as a comprehensive explanation of the agency's zero-tolerance policy for sexual abuse and sexual harassment within 30 days of Intake. A review of 42 prisoner files subsequent this corrective action reflects 100% of those prisoners were provided with both pieces of information within the required time frames. As such, the facility has addressed this concern and no further action is necessary.

### Standard 115.34: Specialized training: Investigations

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.34 (a)

- 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  No  NA

##### 115.34 (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  No  NA

- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA
  
- 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  No  NA
  
- 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  No  NA

#### 115.34 (c)

- 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  No  NA

#### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC New Sergeant Training, PREA

- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-11-19
- National Institute of Corrections, PREA Investigating Sexual Abuse in a Confinement Setting Course
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Administrative (Human Resources) Staff
- NCF Investigative Staff

#### Site Review Observations:

- Observed investigative training certifications.
- Reviewed agency training records documenting investigative training curriculums.

#### Standard Subsections:

- (A) Per policy (MDOC Prison Rape Elimination Act (PREA) Manual, MDOC #03.03.140), all investigators must receive specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, conducting investigations in confinement settings. In interviewing NCF investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications demonstrated onsite provided additional documentation to support facility compliance.
- (B) Per policy (MDOC Prison Rape Elimination Act (PREA) Manual, MDOC #03.03.140), all investigators must receive specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. In interviewing NCF investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications demonstrated onsite provided additional documentation to support facility compliance.

(C) The agency maintains documentation that agency investigators have completed the required specialized training related to sexual abuse investigations. There are 22 investigators currently employed who have completed the required investigator training. Specifically, the MDOC PREA Manual requires that “documentation of training attendance shall be maintained in the MDOC Training Automated Data System.” A review of training investigator training attendance and certifications onsite confirms that such documentation is maintained within agency files for all investigators currently utilized within the NCF.

(D) The auditor is not required to audit this provision.

#### Reasoning & Findings Statement:

This standard works to ensure that persons investigating allegations of sexual abuse and sexual harassment have been sufficiently trained in related procedural and due process requirements necessary for both administrative prison hearings and for federal or state judiciary proceedings. The NCF investigative staff are required to attend both general PREA training, as well as PREA trainings specific to conducting investigations of sexual victimization in a confinement setting. NCF investigative staff affirmed receipt of sufficient training necessary to confidently conduct sexual abuse investigations in a confinement setting. As well, documentation verified that NCF investigative staff do receive specialized training in excess of the generalized training provided to all staff. As such, the NCF meets the requirements of this standard.

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

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.35 (a)

- 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  No  NA
- 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  No  NA
- 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  No  NA
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full-

or part-time medical or mental health care practitioners who work regularly in its facilities.)

Yes  No  NA

#### 115.35 (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.)  
 Yes  No  NA

#### 115.35 (c)

- 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  No  NA

#### 115.35 (d)

- 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  No  NA
- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17

- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.05.101, In-Service Training, 4-27-15
- MDOC Training Division, Training Plan, 4-19-22
- MDOC PREA Healthcare & Mental Health Training Course Quiz, 2021-2022
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b
- NCF PREA for Health Care and Mental Health: 10-22-25, 6-25-25, 9-30-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Administrative (Human Resources) Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of the **Helen Newberry Joy Hospital & Healthcare Center**

#### Site Review Observations:

- Review of facility training records

#### Standard Subsections:

(A) The NCF provides medical and mental health services to prisoners assigned to its facility. Policy (MDOC PREA Manual, 02.05.101) requires that “in addition to the general PREA training provided to all employees, contracted and volunteer health care and mental health care staff will be provided with specialized training developed by the Training Division relating to sexual abuse in confinement settings. Specialized training shall include the following: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse; (and) how and whom to report allegations or suspicions of sexual abuse and sexual harassment.” There are **seven (7)** medical and mental health care practitioners who regularly work at the NCF. As noted by the PREA Coordinator, **100%** have received training on the agency’s PREA policies. Interviews with NCF medical/mental health staff, as well as with SAFE/SANE nursing personnel of the **Helen Newberry Joy Hospital & Healthcare Center**, all confirm that said persons have received trainings as required. A review of agency training records document staff participation in initial and/or continuing training requirements.

(B) In accordance agency policy and verified through interviews with NCF medical/mental health staff, medical staff at NCF do not conduct forensic medical examinations. Rather, as confirmed

by SAFE/SANE personnel, prisoners are transported to a nearby public medical facility, **Helen Newberry Joy Hospital & Healthcare Center**, for such services.

(C) A review of training records reflects that **100% of the seven (7)** Medical and Mental Health employees assigned to the NCF have received specialized training appropriate for their professional roles.

(D) As well, in accordance with their professional role, a review of training records reflects medical and mental health practitioners have also received the generalize PREA training provided to all other persons working within a correctional setting.

#### Reasoning & Findings Statement:

This standard works to ensure that medical and mental health staff have received specialized training for medical and mental health services provided to victims of sexual abuse and sexual harassment. The NCF has policies in place to ensure all NCF medical and mental health staff are furnished this training. NCF medical and mental health administration confirmed that said staff have received all required and continuing education classes specific to their professional role as it applies to medical and mental health services administered when assisting victims of sexual abuse and sexual harassment. Also, the SAFE/SANE personnel assigned to the **Helen Newberry Joy Hospital & Healthcare Center** confirmed that all persons conducting forensic medical exams are properly certified to perform said exams. Documentation of agency training verified that said staff do receive not only the generalized PREA training provided to all staff, but also specialized training specific to their medical and mental health roles within the agency. As such, the NCF meets the requirements of this standard.

## SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

### Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.41 (a)

- Are all prisoners assessed during an intake screening for their risk of being sexually abused by other prisoners or sexually abusive toward other prisoners?  Yes  No
- Are all prisoners assessed upon transfer to another facility for their risk of being sexually abused by other prisoners or sexually abusive toward other prisoners?  Yes  No

#### 115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

#### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

#### 115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (1) Whether the prisoner has a mental, physical, or developmental disability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (2) The age of the prisoner?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (3) The physical build of the prisoner?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (4) Whether the prisoner has previously been incarcerated?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (5) Whether the prisoner's criminal history is exclusively nonviolent?  
 Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (6) Whether the prisoner has prior convictions for sex offenses against an adult or child?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (7) Whether the prisoner is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the prisoner about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the prisoner is gender nonconforming or otherwise may be perceived to be LGBTI)?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (8) Whether the prisoner has previously experienced sexual victimization?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (9) The prisoner's own perception of vulnerability?  Yes  No
- Does the intake screening consider, at a minimum, the following criteria to assess prisoners for risk of sexual victimization: (10) Whether the prisoner is detained solely for civil immigration purposes?  Yes  No

#### 115.41 (e)

- In assessing prisoners for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse?  Yes  No
- In assessing prisoners for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses?  Yes  No
- In assessing prisoners 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  No

#### 115.41 (f)

- Within a set time period not more than 30 days from the prisoner's arrival at the facility, does the facility reassess the prisoner's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?  Yes  No

#### 115.41 (g)

- Does the facility reassess an prisoner's risk level when warranted due to a referral?  Yes  No
- Does the facility reassess an prisoner's risk level when warranted due to a request?  Yes  No
- Does the facility reassess an prisoner's risk level when warranted due to an incident of sexual abuse?  Yes  No
- Does the facility reassess an prisoner's risk level when warranted due to receipt of additional information that bears on the prisoner's risk of sexual victimization or abusiveness?  Yes  No

#### 115.41 (h)

- Is it the case that prisoners 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  No

#### 115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the prisoner's detriment by staff or other prisoners?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

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#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC PREA Risk Assessment Manual, 8-12-15
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #05.01.140, Prisoner Placement and Transfer, 11-1-17
- MDOC PREA Risk Assessment Worksheet, 6/15
- National PREA Resource Center, PREA Standards in Focus, 115.33
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- **NCF Prisoner Risk Screening & Orientation Compliance Rates, 10-20-25**
- NCF Memo, Risk Screening Procedures, 10-29-25
- NCF Individual Training Program Report, Institutional Training-NCF, PREA Standards 115.33 and 115.41, 11-15-25
- NCF Prisoner Assessments, 72-Hours: 2-9-24, 10-14-24, 5-7-25, 5-21-25, 5-22-25, 5-23-25, 5-30-25, 6-5-25, 6-6-25, 6-27-25a, 6-27-25b, 7-9-25, 7-16-25, 7-18-25, 7-23-25, 7-25-25, 8-1-25a, 8-1-25b, 8-5-25, 8-6-25, 8-20-25, 8-22-25, 9-1-25
- NCF Prisoner Assessments, 30 Days: 3-5-24, 11-12-24, 6-2-25, 6-25-25a, 6-25-25b, 6-27-25a, 6-27-25b, 6-30-25a, 6-30-25b, 7-22-25a, 7-22-25b, 8-6-25, 8-10-25, 8-11-25, 8-12-25, 8-20-25, 8-25-25a, 8-25-25b, 8-25-25c, 8-27-25, 9-3-25
- NCF CAP Week 1, Incoming Chain, November 23-29, 2025
- NCF CAP Week 2, Incoming Chain, December 1-5, 2025
- NCF CAP Week 3, Incoming Chain, December 8-12, 2025
- NCF CAP Week 4, Incoming Chain, December 15-20, 2025
- NCF CAP Prisoner Initial and Comprehensive Compliance Rates, 1-13-25
- NCF Prisoner Assessments, 72-Hours: 11-25-25a, 11-25-25b, 11-26-25a, 11-26-25b, 11-26-25c, 11-26-25d, 11-26-25e, 11-26-25f, 11-26-25g, 11-26-25h, 11-26-25i, 11-26-25j, 11-26-25k, 11-26-25l, 11-26-25m, 11-26-25n, 12-5-25a, 12-5-25b, 12-5-25c, 12-5-25d, 12-5-25e, 12-5-25f, 12-5-25g, 12-12-25a, 12-12-25b, 12-12-25c, 12-12-25d, 12-12-25e, 12-12-25f, 12-12-25g, 12-12-25h, 12-12-25i, 12-12-25j, 12-19-25a, 12-19-25b, 12-19-25c, 12-19-25d, 12-19-25e, 12-19-25f, 12-19-25g, 12-19-25h, 12-19-25i, 12-19-25j

- NCF Prisoner Assessments, 30 Days: 12-12-25a, 12-12-25b, 12-12-25c, 12-12-25d, 12-15-25a, 12-15-25b, 12-15-25c, 12-15-25d, 12-17-25a, 12-17-25b, 12-17-25c, 12-17-25d, 12-17-25e, 12-17-25f, 12-19-25a, 12-19-25b, 12-30-25a, 12-30-25b, 12-30-25c, 12-30-25d, 12-30-25e, 12-30-25f, 12-30-25g, 12-30-25h, 1-5-26a, 1-5-26b, 1-5-26c, 1-5-26d, 1-5-26e, 1-5-26f, 1-5-26g, 1-5-26h, 1-5-26i, 1-6-26, 1-7-26a, 1-7-26b, 1-7-26c, 1-7-26d, 1-7-26e, 1-7-26f, 1-7-26g

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Intake Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Prisoners Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Prisoners Who Reported Sexual Abuse
- Limited English Proficient Prisoners
- Disabled Prisoners
- Random Prisoners

#### Site Review Observations:

- Observed PREA screening demonstration.
- Observed housing formats and locations.
- Reviewed forty-three (43) prisoner files for documentation of risk screening.

#### Standard Subsections:

- (A) Policy (03.03.140) requires that “all prisoners shall be assessed during an intake screening and upon transfer to another facility for their risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners.” The NCF Intake Staff affirm the facility’s adherence to agency policy. Specifically, prisoners received into the facility are generally screened for sexual victimization and/or sexually abusive risk factors once received into the facility. The Intake and Risk Screen Processes were observed by the auditor.
- (B) Policy (03.03.140) requires that the screenings will be completed “within 72 hours of the prisoner’s arrival at a correctional facility, including intake” During the audit time frame, the NCF received 852 prisoners into the facility. As noted by the NCF PREA Compliance Manager, 100% of said prisoners received their required initial risk screening. In speaking with NCF Intake staff, as well as the NCF PREA Compliance Manager, it was noted that said screenings usually take place within 72 hours of each prisoner’s arrival to the facility. During interviews with prisoners, eight (8) of the forty-three (43) prisoners interviewed stated they had not received an initial PREA assessment upon their assignment to the NCF. Accordingly, assessment records were pulled for each of the forty-three (43) prisoners interviewed. It was then noted that the facility had an initial risk assessment compliance rate of 81%. As such, corrective action was needed to address this deficiency. This given, corrective action was developed to ensure all prisoners are provided with an initial risk assessment within 72 hours of their arrival at the

facility. A review of forty-two (42) random prisoners received subsequent the implementation of this new risk assessment process reflected that 100% of those prisoners were provided an initial risk assessment within 72 hours of their Intake. As such, the facility has addressed this concern and no further action is necessary.

- (C) The PREA screening assessment is conducted using an objective screening instrument (the OMNI Risk Assessment Tool). A review of the twenty-one (21) survey questions provided to prisoners does not present with either an implicit bias or leading statements. The OMNI Risk Assessment Tool does not contain value statements, bias language, or implied negative consequences for affirmative answers to any of the questions asked. Rather, it is a strictly utilitarian form that was administered in a nonjudgmental manner during a mock screening demonstration. To determine a prisoner's risk of sexual victimization, a prisoner is asked fourteen questions. To determine a prisoner's risk of sexual abusiveness, a prisoner is asked another seven questions.
- (D) The OMNI Risk Assessment Tool does consider, at a minimum, if the prisoner has a mental, physical, or developmental disability. It considers the age of the prisoner, the prisoner's physical build, whether the prisoner has previously been incarcerated, whether the prisoner's criminal history is exclusively nonviolent, whether the prisoner has prior convictions for sex offenses against an adult or child, whether the prisoner has previously experienced sexual victimization, the prisoner's own perception of vulnerability, and whether the prisoner is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. The risk screener is allowed to enter subjective perceptions related to the risk screening, as well as other comments that might affect the prisoner's sexual safety. It should be noted that the NCF does not detain prisoners solely for immigration purposes.
- (E) In assessing prisoners for their risk of being sexually abusive, the OMNI Risk Assessment Tool does consider prior acts of sexual abuse, prior convictions for violent offenses, and the history of prior institutional violence or sexual abuse. Along with observing the screening process, the auditor also reviewed numerous OMNI Risk Assessment Tools completed within the auditing time frame. All forms were filled out in their entirety, with prisoners having generally provided relevant answers to each of the questions asked. It should further be noted that Intake staff confirmed that prisoners may refuse to answer any question on the survey or may refuse participation in the entire survey without the threat of negative consequences.
- (F) Policy (03.03.140) requires that a subsequent risk assessment for victimization or abusiveness should be completed on each prisoner "no earlier than 14 days but no later than 30 calendar days of arrival, including intake." During the audit time frame, the NCF received 813 prisoners into the facility whose stay was for 30 days or more. As noted by the NCF PREA Compliance Manager, 100% of said prisoners received their required initial PREA training. In speaking with NCF Intake staff, as well as the NCF PREA Compliance Manager, it was noted that said screenings usually take place within 30 days of each prisoner's arrival to the facility. During interviews with prisoners, thirteen (13) of the forty-three (43) prisoners interviewed stated they had not received a subsequent PREA assessment within 30 days of their assignment to the NCF. Accordingly, assessment records were pulled for each of the forty-three (43) prisoners interviewed. It was then noted that the facility had a subsequent risk assessment compliance rate of 70%. As such, corrective action was needed to address this deficiency. This given, corrective

action was developed to ensure all prisoners are provided with a subsequent risk assessment within 30 days of their arrival at the facility. A review of forty-two (42) random prisoners received subsequent the implementation of this new risk assessment process reflected that 95% of those prisoners were provided with a subsequent risk assessment within 14 to 30 days of their initial Intake. A 95% assessment rate does reflect compliance with this standard; namely, prisoners are ordinarily provided with risk screenings within the required time frame. Nonetheless, the agency's PREA Compliance Unit still ensures continued efforts will remain forefront in bringing the NCF to a 100% compliance rate with subsequent risk assessments. As such, the facility, in coordination with the agency, has addressed this concern and no further oversight is necessary.

- (G) Policy (03.03.140) allows that “whenever warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may increase the prisoner’s risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners,” a subsequent risk assessment can be performed. Both the NCF PREA Compliance Manager, as well as staff who perform screening for risk of victimization and abusiveness, confirm reassessments are conducted as required.
- (H) Policy (03.03.140) expressly prohibits disciplinary sanctions against any prisoner who refuses to answer or fails to provide complete and/or accurate answers to any of the questions noted on the OMNI Risk Assessment Tool. When interviewed, Intake staff and the PREA Compliance Manager affirmed that disciplinary sanctions were not imposed against prisoners for refusing or failing to answer any of the questions on the OMNI Risk Assessment Tool. As well, prisoner interviews confirmed that said population was aware of their right not to answer related questions.
- (I) Policy (03.03.140) requires that the “results of risk assessments shall not be shared with prisoners. Information provided during the risk assessment shall be shared only with those who need to know for housing, bunking, and work assignment placement. Reasonable steps shall be taken to ensure the confidentiality of information obtained during the risk assessment process.” Accordingly, all PREA screenings are provided a necessary level of privacy. Policy further requires, as well as reinforced by the electronic credential requirements necessary to gain access to the OMNI Risk Assessment Tool, that facility staff must restrict the spread of information obtained as a function of the OMNI Risk Assessment Tool to only those designated staff members with an operational need for said information in order to inform classification, housing and work assignments, programmatic and non-programmatic activities, or other relevant institutional activities. The PREA Compliance Manager, as well as other operative staff associated with the OMNI Risk Assessment Tool, affirmed the information obtained by way of said document was considered restricted, and as such, was not distributed to unauthorized staff. Lastly, the auditor observed that completed OMNI Risk Assessment Tools did require authorized credentials to access said documents within the NCF electronic data base.

#### Reasoning & Findings Statement:

This standard works to ensure prisoners are properly screened for their risks of sexual victimization and abusiveness. Agency policy provides for an objective OMNI Risk Assessment Tool, which is administered and scored at the facility level as a simple fact assessment. Using this tool, prisoners

should be assessed with 72 hours of their arrival, subsequently assessed within 30 days of their arrival to the facility, as well as reassessed if new information is discovered by facility staff that might warrant changes in prisoners' risk status. Interviews with facility screening staff, as well as with prisoners, confirm that the proper screening tool is being utilized at the NCF. As well, the information gleaned from this form is appropriately used to inform classification, housing, work, and other facility-based activities. Staff charged with administering OMNI Risk Assessment Tool also affirm the restricted nature of the information and their adherence to the facility's limited distribution list. However, within the audit time frame, a random review of prisoner risk assessment records reflected an 81% compliance rate with initial risk screenings being performed within 72 hours of Intake and 70% compliance with subsequent risk screenings being performed within 30 days of Intake. As such, corrective action was needed to address this deficiency. This given, corrective action was developed to ensure prisoners are provided with an initial risk assessment within 72 hours of their arrival at the facility, as well as a subsequent assessment within 14 to 30 days of their arrival. A review of forty-two (42) random prisoners received subsequent the implementation of this new risk assessment process reflected that 100% of those prisoners were provided an initial risk assessment within 72 hours of Intake and 95% of those prisoners were provided a subsequent risk assessment within 14 to 30 days of their initial Intake. In total, as the facility now demonstrates that initial risk screenings are ordinarily provided within 72 hours and subsequent risk screenings are ordinarily conducted between 14 to 30 days of prisoner reception, coupled with the PREA Compliance Unit's continued attention focused on improving the combined compliance rate to 100%, the facility, in coordination with the agency, has addressed this concern and no further oversight is necessary.

## Standard 115.42: Use of screening information

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?  Yes  No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those prisoners at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?  Yes  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each prisoner?  Yes  No

#### 115.42 (c)

- When deciding whether to assign a transgender or intersex prisoner to a facility for male or female prisoners, does the agency consider, on a case-by-case basis whether a placement would ensure the prisoner's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns prisoners to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?  Yes  No
- When making housing or other program assignments for transgender or intersex prisoners, does the agency consider on a case-by-case basis whether a placement would ensure the prisoner's health and safety, and whether a placement would present management or security problems?  Yes  No

#### 115.42 (d)

- Are placement and programming assignments for each transgender or intersex prisoner reassessed at least twice each year to review any threats to safety experienced by the prisoner?  Yes  No

#### 115.42 (e)

- Are each transgender or intersex prisoner'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  No

#### 115.42 (f)

- Are transgender and intersex prisoners given the opportunity to shower separately from other prisoners?  Yes  No

#### 115.42 (g)

- 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 prisoners, does the agency always refrain from placing: lesbian, gay, and bisexual prisoners 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 prisoners pursuant to a consent decree, legal settlement, or legal judgement.)  Yes  No  NA
- 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 prisoners, does the agency always refrain from placing: transgender prisoners 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 prisoners pursuant to a consent decree, legal settlement, or legal judgement.)  Yes  No  NA

- 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 prisoners, does the agency always refrain from placing intersex prisoners 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 prisoners pursuant to a consent decree, legal settlement, or legal judgement.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #05.01.140, Prisoner Placement and Transfer, 11-1-17
- MDOC #04.06.184, Gender Dysphoria, 6-26-17
- MDOC Gender/Gender Identity Housing Requests Memo, 12-16-21
- MDOC PREA Risk Assessment Worksheet, 6/15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- **NCF Prisoner Risk Screening & Orientation Compliance Rates, 10-20-25**
- NCF Prisoner Assessments, 72-Hours: 2-9-24, 10-14-24, 5-7-25, 5-21-25, 5-22-25, 5-23-25, 5-30-25, 6-5-25, 6-6-25, 6-27-25a, 6-27-25b, 7-9-25, 7-16-25, 7-18-25, 7-23-25, 7-25-25, 8-1-25a, 8-1-25b, 8-5-25, 8-6-25, 8-20-25, 8-22-25, 9-1-25
- NCF Prisoner Assessments, 30 Days: 3-5-24, 11-12-24, 6-2-25, 6-25-25a, 6-25-25b, 6-27-25a, 6-27-25b, 6-30-25a, 6-30-25b, 7-22-25a, 7-22-25b, 8-6-25, 8-10-25, 8-11-25, 8-12-25, 8-20-25, 8-25-25a, 8-25-25b, 8-25-25c, 8-27-25, 9-3-25
- NCF Current Designations Report: 7-22-25

## Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Intake Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Staff
- Prisoners Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Disabled Prisoners
- Limited English Proficient Prisoners

## Site Review Observations:

- Observed PREA screening process.
- Reviewed prisoner files.
- Observed prisoner housing and work assignments.
- Reviewed thirty-eight (38) prisoner files for documentation of risk screening.

## Standard Subsections:

- (A) Policy (03.03.140) requires that the agency use information from the OMNI Risk Assessment Tool to help separate prisoners with a high risk of being sexually victimized from those prisoners with a high risk of being sexually abusive. As such, the information gleaned from the OMNI Risk Assessment Tool is used to inform prisoner housing, bed, work, education, and program assignments. In speaking with Intake staff, as well as the NCF PREA Compliance Manager, once a prisoner is deemed as a possible high risk for sexual victimization, staff will ensure that the prisoner at risk is not housed in a vulnerable location with respect to other prisoners who are assessed at a high risk to sexually abuse other prisoners. Facility documentation reflects this is an institutionalized process.
- (B) Policy (03.03.140) requires that the facility makes individualized determinations on how to ensure the safety of each prisoner. In speaking with the PREA Coordinator, the NCF PREA Compliance Manager, and the NCF Warden, staff affirmed that the concerns for every prisoner are reviewed on an individual basis. In speaking with prisoners currently assigned to the NCF, most stated that their own opinions regarding their personal safety are considered by NCF staff when provided housing or job assignments.
- (C) In deciding whether to assign a transgender or intersex prisoner to a facility for male or female prisoners, agency policy (MDOC PREA Manual, 03.03.140, 04.06.184) requires that administrators consider, on a case-by-case basis, whether such a placement would ensure the prisoner's health and safety and whether such a placement would present management or security problems. In deciding whether to assign a transgender or intersex prisoner to a specific housing or program assignment, agency policy (04.06.184) dictates administrators consider, on a

case-by-case basis, whether such a placement would ensure the prisoner's health and safety and whether such a placement would present management or security problems. In speaking with the PREA Coordinator, the NCF PREA Compliance Manager, and the NCF Warden, staff affirmed that a prisoner's genital status is not the sole determining factor in placing transgender or intersex prisoners in male or female facilities, or in placing said prisoners within specific housing or program assignments within a facility.

(D) As noted by the PREA Coordinator, the placement and programming assignments of transgender or intersex prisoners are reviewed at least twice every year to examine any possible safety concerns expressed by the prisoner. When interviewed, NCF Risk Assessment staff did affirm the facility's compliance with this policy. In speaking with the one (1) transgender prisoner assigned to NCF, that individual stated that facility staff do perform required risk assessments at least twice each year. A review of facility documentation does reflect that such assessments are conducted as required.

(E) Agency policy (03.03.140) requires that upon the routine review of the placement and programming assignments of transgender or intersex prisoners, the transgender or intersex prisoner's own view with respect to his or her own safety shall be given serious consideration. When interviewed, NCF staff and the PREA Compliance Manager affirmed that the facility strictly adheres to this policy. In speaking with the one (1) transgender prisoner assigned to NCF, that individual stated that facility staff do take into consideration the prisoner's own views for their own safety. A review of facility documentation does reflect that such consideration is provided as required.

(F) Policy (03.03.140) allows for transgender and intersex prisoners to be given the opportunity to shower separately from other prisoners. During the onsite portion of the audit, it was noted that all showers do contain PREA privacy screens. Interviews with Risk Assessment Staff, as well as the PREA Compliance Manager, note that transgender inmates are allowed to shower separately from other prisoners. In speaking with the one (1) transgender prisoner assigned to NCF, that individual stated that they were either allowed to shower separately or they didn't have any concerns regarding showers.

(G) Per the PREA Compliance Manager, there aren't any correctional facilities within the MDOC subject to consent decrees, legal settlements, or legal judgments requiring any facility to be established as a dedicated facility or housing unit for lesbian, gay, bisexual, transgender, or intersex prisoners. In speaking with the PREA Coordinator, the NCF PREA Compliance Manager, and the NCF Warden, staff adamantly affirm that prisoners who identify as transgender or intersex are not placed in a facility, or within a housing assignment, based solely on their sexual or gender identity. Relevant documentation was reviewed. During interviews with transgender, gay, and bisexual prisoners, none stated that they had ever been housed in a facility, or in a specific housing assignment within the NCF, based solely on their gender identity or sexual orientation. As well, of the random staff interviewed, all staff affirmed that the NCF does not house transgender, intersex, gay, or bisexual prisoners in any specific areas based solely on their gender identity or sexual orientation.

#### Reasoning & Findings Statement:

This standard works to ensure the adequate use of screening information to protect prisoners who may be at high risk of being sexually victimized. The NCF has numerous policies in place to ensure the most effective and secure use of the OMNI Risk Assessment Tool. Prisoners deemed to be at high risk are routinely monitored by the NCF PREA Compliance Manager, as well as unit staff, to ensure their sexual safety. Agency policies require staff to make individualized determinations on a case-by-case basis regarding prisoner safety. Interviews with the PREA Coordinator and the PREA Compliance Manager reflect that facility staff have discretion in managing the safety of individual prisoners. The NCF PREA Compliance Manager, as well as all other NCF staff, affirm their adherence to agency policies and also confirm that the prisoner's own views regarding the prisoner's own safety are given serious consideration specific to facility operations. **Transgender prisoners are allowed to shower separately from the general population. Additionally, transgender prisoners are reviewed twice per year specific to their placement and programming assignments.** As such, agency policy meets, and NCF adheres to, the requirements of this standard.

## Standard 115.43: Protective Custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.43 (a)

- Does the facility always refrain from placing prisoners 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  No
- If a facility cannot conduct such an assessment immediately, does the facility hold the prisoner in involuntary segregated housing for less than 24 hours while completing the assessment?  Yes  No

#### 115.43 (b)

- Do prisoners who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- Do prisoners who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?  Yes  No
- Do prisoners who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?  Yes  No
- Do prisoners 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  No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA

- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA

#### 115.43 (c)

- Does the facility assign prisoners at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?  Yes  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- 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 prisoner's safety?  Yes  No
- 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  No

#### 115.43 (e)

- In the case of each prisoner 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.05.120, Segregation Standards, 6-1-19
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Prisoners Who Reported Sexual Abuse
- Random Prisoner Interviews
- Targeted Prisoner Interviews

#### Site Review Observations:

- Observed custody housing assignments.

#### Standard Subsections:

(A) Policy (MDOC PREA Manual) mandates that “prisoners at high risk for sexual victimization or who are alleged to have suffered sexual abuse shall not be placed in involuntary temporary segregation unless an assessment of all available alternatives is complete and a determination has been made that no less restrictive means of separation from likely abusers exist. If the review cannot be conducted immediately, the prisoner may be held in temporary segregation for up to 24 hours while the review is complete.” In speaking with the PREA Compliance Manager and the NCF Warden, said staff confirmed that while segregated housing could be used to protect prisoners if necessary, both staff confirm that such housing would be used only when absolutely necessary and for the least amount of time possible until alternative housing accommodations could be found. In speaking with the PREA Compliance Manager and the NCF Warden, staff confirmed that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn’t any relevant documentation to review.

(B) Policy (MDOC PREA Manual) allows that the victim shall be housed in an environment that shall, to the extent possible, permit the victim the same level of privileges the victim was permitted immediately prior to the sexual abuse. Specifically, efforts should be made to ensure these prisoners receive similar access to “programs, privileges, education, and work opportunities to the extent possible” as prisoners assigned to the general population. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document these restrictions. As a function of this documentation, staff must further

document the opportunities that have been limited, the duration of the limit, and the reasons for said limitation. In speaking with the PREA Compliance Manager and the NCF Warden, said staff confirmed that while segregated housing could be used to protect prisoners when necessary, both staff confirm that such housing would be used only when absolutely necessary and for the least amount of time possible until alternative housing accommodations could be found. In speaking with the PREA Compliance Manager and the NCF Warden, staff confirmed that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn't any relevant documentation to review.

(C) Policy (MDOC PREA Manual, 04.05.120) mandates that the involuntary temporary segregation for prisoners at a high risk of sexual victimization shall only be used until an alternative means of separation from likely abusers can be arranged, but no more than 24 hours without an assessment of all available alternatives has been completed. Policy (MDOC PREA Manual) further requires that the assignment shall not ordinarily exceed a period of 30 days. In speaking with the PREA Compliance Manager and the NCF Warden, said staff confirmed that while segregated housing could be used to protect prisoners when necessary, both staff confirm that such housing would be used only when absolutely necessary and for the least amount of time possible until alternative housing accommodations could be found. In speaking with the PREA Compliance Manager and the NCF Warden, staff confirmed that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn't any relevant documentation to review.

(D) Policy (MDOC PREA Manual) requires that upon placement of a prisoner into the involuntary temporary segregation, the facility must clearly document the basis of the facility's concern for the prisoner's safety. Additionally, the facility must document whether a determination has been made that there is no available alternative means of separation from the likely abusers, including documentation of what alternatives were considered and assessed to be unavailable. In speaking with the PREA Compliance Manager and the NCF Warden, said staff confirmed that while segregated housing could be used to protect prisoners when necessary, both staff confirm that such housing would be used only when absolutely necessary and for the least amount of time possible until alternative housing accommodations could be found. In speaking with the PREA Compliance Manager and the NCF Warden, staff confirmed that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn't any relevant documentation to review.

(E)

(F) Policy (04.05.120) requires that a prisoner placed in "temporary segregation for more than 30 calendar days, the facility shall afford the prisoner a review to determine whether there is a continuing need for separation." In speaking with the PREA Compliance Manager and the NCF Warden, staff confirmed both their knowledge of this policy and the fact that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn't any relevant documentation to review.

Reasoning & Findings Statement:

This standard works to ensure that the use of involuntary temporary segregation is not a de facto management solution for prisoner safety concerns. Agency policy explicitly mandates that staff refrain from placing prisoners at high risk for sexual victimization in involuntary temporary segregation unless an assessment of all available alternatives has been made and there are no other available means of separation from likely abusers. In speaking with the PREA Compliance Manager and the NCF Warden, said staff confirmed that there have not been any (0) prisoners placed in the involuntary temporary segregation for risk of sexual safety during the audit time frame. As such, there wasn't any relevant documentation to review. In total, the NCF has satisfied all component parts of this standard and found to have met its provisions.

## REPORTING

### Standard 115.51: Prisoner reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.51 (a)

- Does the agency provide multiple internal ways for prisoners to privately report sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for prisoners to privately report retaliation by other prisoners or staff for reporting sexual abuse and sexual harassment?  Yes  No
- Does the agency provide multiple internal ways for prisoners to privately report staff neglect or violation of responsibilities that may have contributed to such incidents?  Yes  No

#### 115.51 (b)

- Does the agency also provide at least one way for prisoners to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?  Yes  No
- Is that private entity or office able to receive and immediately forward prisoner reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the prisoner to remain anonymous upon request?  Yes  No
- Are prisoners 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 prisoners detained solely for civil immigration purposes)  Yes  No  NA

#### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  Yes  No

#### 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of prisoners?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.01.140, Prisoner Orientation, 5-30-22
- MDOC #05.03.118, Prisoner Mail, 03-1-18
- MDOC Prisoner Guidebook, English, June 2014
- MDOC An Inside Line poster, English, 2023
- MDOC An Inside Line poster, Spanish, 2023
- MDOC Zero Tolerance Policy, Trifold Brochure, English, 8-19-22
- MDOC Zero Tolerance Policy, Trifold Brochure, Spanish, 8-19-22
- MDOC Sexual Abuse Poster, English
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- MDOC Privacy Notice posted sign, English
- MDOC Privacy Notice posted sign, Spanish
- MDOC PREA Notice, Limitations to Confidentiality, English
- MDOC PREA Notice, Limitations to Confidentiality, Spanish
- MDOC PREA Discharge Reporting Information form, 2/21

- MDOC MOU The Legislative Corrections Ombudsman, 12-17-14
- MDOC MOU Just Detention International, through 9-30-26
- MDOC MOU Diane Pepler Resource Center, 7-21-25
- MDOC Memo, Standard 115.51(b), 1-14-20
- MDOC PREA Discharge Reporting Information form, 2/21
- MDOC Training Division, Training Plan: 4-19-22
- MDOC PREA All Employees Course Quiz Questions, 2021-2022
- National PREA Resource Center, PREA Training, Part 1-10, 2022
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025

#### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Random Staff
- Just Detention International
- Random Prisoners
- Prisoners Who Disclosed Sexual Victimization During Risk Screening
- Prisoners Who Reported Sexual Abuse

#### Site Review Observations:

- Reviewed documentation related to prisoner reports of sexual abuse and sexual harassment.
- Observed PREA Risk Screening assessments.
- Observed PREA Risk Screening process.
- Observed informational posters throughout the facility advising prisoners of various reporting mechanisms for allegations of sexual abuse and sexual harassment.
- Observed PREA educational and reporting references available for prisoner use within the facility Law Library.
- Observed visitation area designated for members of an approved victim advocate service.
- Tested *PREA Hotline* number prisoners can use to engage prisoner reporting.
- Review of reporting method utilized via institutive files.

#### Standard Subsections:

- (A) The agency provides multiple internal ways for prisoners to privately report sexual abuse and sexual harassment, as well as neglect or violations of staff responsibilities that may have contributed to such incidents. Additionally, the agency provides numerous avenues by which prisoners may report any subsequent retaliatory measures experienced by prisoners as a result of having reported said abuse. Upon receipt onto the facility, all prisoners are provided a PREA risk screening, via the OMNI Risk Assessment Tool, and advised of their right to be free of sexual abuse and sexual harassment under the PREA standards. Prisoners are subsequently given a more comprehensive prisoner orientation within 7 days of their receipt into the facility. This orientation includes detailed training on the NCF PREA program. This training includes

information on, and contact information for, internal and external reporting agencies. Prisoners are also provided with an NCF Prisoner Guidebook, which contains contact information for internal and external reporting agencies and victim services organizations. In interviewing staff, all employees were aware of a prisoner's right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. In interviewing prisoners, all prisoners were equally aware of their right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. During random and targeted interviews, all prisoners were able to articulate at least one manner by which a report could be made, with the majority of prisoners being able to provide multiple reporting methods.

- (B) As noted in policy (PREA Manual, Prisoner Guidebook, 03.03.140, 05.03.118), the facility also provides multiple avenues and contact information for prisoners to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. Via the PREA and Prohibited Sexual Conduct Involving Prisoners pamphlet, prisoners are provided the phone numbers to the MDOC Sexual Abuse Hotline, with calls to this hotline being anonymous and without cost to the prisoner. Prisoners are provided the address to the primary reporting entity, the Michigan Department of Corrections PREA Office, as well as a third-party organization, the Legislative Corrections Ombudsman Office, which can receive and immediately forward prisoner reports to agency officials for their investigation. Upon a prisoner's request, both agencies will allow a prisoner to remain anonymous. As well, prisoners are provided an online reporting mechanism that provides family or friends immediate reporting access. Per the agency PREA Unit, the NCF does not detain prisoners solely for civil immigration purposes.
- (C) Per policy (PREA Manual, 03.03.140), staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. All employees interviewed stated that they would act on any report of sexual abuse or sexual harassment regardless of the manner by which they became aware of that information. In doing so, many staff stated that they would document all such reports as soon as possible following the allegations being presented to them. All prisoners interviewed affirmed their right to make either verbal or written reports of sexual abuse and sexual harassment. Most prisoners were also aware that they could make reports of sexual abuse and sexual harassment via third party or anonymously.
- (D) Per policy (PREA Manual, 03.03.140), staff have an affirmative duty to report any knowledge, suspicion, or information they may have regarding sexual abuse, sexual harassment, or retaliation against prisoners or staff for having reported such abuse. Nonetheless, per policy (PREA Manual), staff may report "privately report sexual abuse and sexual harassment allegations through their chain of command, via the MDOC Sexual Abuse Hotline message line, MDOC website or by writing the Internal Affairs Division." When asked, staff were generally aware that they could make anonymous reports of sexual abuse and sexual harassment.

#### Reasoning & Findings Statement:

This standard works to ensure prisoners, staff, and outside agents have the ability to report all instances of sexual abuse and sexual harassment against prisoners. The agency does have multiple avenues by which prisoners may make formal reports, to include verbal, written, anonymous, and third-party

reports. Prisoners are provided detailed instructions, contact persons, phone numbers, web addresses, and physical addresses for correspondence where incidents or suspicions of sexual abuse, sexual harassment, and retaliation may be reported. To test the functionality of these services, the auditor conducted a test of the PREA Hotline number commonly referenced by prisoners. In doing this, a confirmation response was received the same business day. In interviewing correctional staff, all such persons were aware that prisoners could report allegations of sexual abuse and sexual harassment verbally, in writing, anonymously, and through a third party. When receiving verbal reports of sexual abuse and sexual harassment, all staff recognized the need to take immediate action to protect the prisoner in question and the need to document the verbal complaint as soon as possible. In speaking with prisoners, all persons were aware of their right to be free from sexual abuse and sexual harassment, as well as their right not to suffer retaliation for having reported such abuse. All prisoners understood their right to make verbal and written complaints. The majority of prisoners understood their right to make anonymous and third-party complaints. As such, it is evident that the NCF has met the requirements of this standard.

## Standard 115.52: Exhaustion of administrative remedies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address prisoner grievances regarding sexual abuse. This does not mean the agency is exempt simply because a prisoner 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  No

#### 115.52 (b)

- Does the agency permit prisoners to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency always refrain from requiring a prisoner to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (c)

- Does the agency ensure that: An prisoner who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (d)

- 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 prisoners in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)  Yes  No  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 prisoner in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)  
 Yes  No  NA
- At any level of the administrative process, including the final level, if the prisoner does not receive a response within the time allotted for reply, including any properly noticed extension, may an prisoner consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)  Yes  No  NA

#### 115.52 (e)

- Are third parties, including fellow prisoners, staff members, family members, attorneys, and outside advocates, permitted to assist prisoners in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)  
 Yes  No  NA
- Are those third parties also permitted to file such requests on behalf of prisoners? (If a third-party files such a request on behalf of an prisoner, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)  Yes  No  NA
- If the prisoner declines to have the request processed on his or her behalf, does the agency document the prisoner's decision? (N/A if agency is exempt from this standard.)  
 Yes  No  NA

#### 115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an prisoner is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  NA
- After receiving an emergency grievance alleging an prisoner is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)  
 Yes  No  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.)  Yes  No  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.)  
 Yes  No  NA
- Does the initial response and final agency decision document the agency's determination whether the prisoner is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)  Yes  No  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.)  Yes  No  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.)  Yes  No  NA

### 115.52 (g)

- If the agency disciplines an prisoner for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the prisoner filed the grievance in bad faith? (N/A if agency is exempt from this standard.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC Class Settlement Agreement, 2020
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Random Prisoners

Site Review Observations:

- Reviewed complaint submission process.

Standard Subsections:

- (A) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (B) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (C) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (D) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (E) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (F) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.
- (G) The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.

Reasoning & Findings Statement:

The MDOC does not have administrative procedures to address prisoner grievances regarding sexual abuse or sexual harassment. As such, the NCF is exempt from this standard.

**Standard 115.53: Prisoner access to outside confidential support services**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.53 (a)**

- Does the facility provide prisoners with access to outside victim advocates for emotional support services related to sexual abuse by giving prisoners mailing addresses and telephone numbers,

including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?  Yes  No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.)  Yes  No  NA
- Does the facility enable reasonable communication between prisoners and these organizations and agencies, in as confidential a manner as possible?  Yes  No

#### 115.53 (b)

- Does the facility inform prisoners, 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  No

#### 115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide prisoners with confidential emotional support services related to sexual abuse?  Yes  No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17

- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.01.140, Prisoner Orientation, 5-30-22
- MDOC #05.03.118, Prisoner Mail, 03-1-18
- MDOC #05.03.130, Prisoner Telephone Use and Attachment B, 12-20-21
- MDOC Prisoner Guidebook, English, June 2014
- MDOC An Inside Line poster, English, 2023
- MDOC An Inside Line poster, Spanish, 2023
- MDOC Zero Tolerance Policy, Trifold Brochure, English, 8-19-22
- MDOC Zero Tolerance Policy, Trifold Brochure, Spanish, 8-19-22
- MDOC Sexual Abuse Poster, English
- MDOC Sexual Abuse Poster, Spanish
- MDOC Privacy Notice posted sign, English
- MDOC Privacy Notice posted sign, Spanish
- MDOC PREA Notice, Limitations to Confidentiality, English
- MDOC PREA Notice, Limitations to Confidentiality, Spanish
- MDOC PREA Discharge Reporting Information form, 2/21
- MDOC MOU The Legislative Corrections Ombudsman, 12-17-14
- MDOC MOU Just Detention International, through 9-30-26
- MDOC MOU Diane Pepler Resource Center, 7-21-25
- MDOC Memo, Standard 115.51(b), 1-14-20
- MDOC Training Division, Training Plan: 4-19-22
- MDOC PREA All Employees Course Quiz Questions, 2021-2022
- National PREA Resource Center, PREA Training, Part 1-10, 2022
- MDOC Prisoner Notice of Availability of *An End of Silence* Memo, 2-3-17
- MDOC Standard 115.53 Inmate Access to Outside Confidential Support Services Memo, 2-20-19
- National PREA Resource Center, *An End of Silence*, 2014
- National PREA Resource Center, PREA Training, 2022
- Just Detention International, *An Inside Line* Memo for Prisoners, 7-30-18
- Just Detention International, *An Inside Line* Memo for Staff, 7-30-18
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of **Helen Newberry Joy Hospital & Healthcare Center**
- Mailroom Staff
- Random Staff
- NCF Website Third Party Reporting Coordinator
- Just Detention International

- Random Prisoners
- Prisoners Who Disclosed Sexual Victimization During Risk Screening
- Prisoners Who Reported Sexual Abuse

#### Site Review Observations:

- Reviewed PREA Risk Screening Assessment
- Review of distributed information upon NCF reception at Intake areas.
- Observed informational posters throughout the facility advising prisoners of various reporting mechanisms for allegations of sexual abuse and sexual harassment.
- Observed numerous PREA educational and reporting references available for prisoner use within the facility Law Library and on prisoner housing areas.
- Observed visitation area designated for members of an approved victim advocate service.
- Tested *PREA Hotline* number prisoners can use for access to confidential rape crisis counseling services.

#### Standard Subsections:

- (A) Policy (03.03.140) requires that “the Department shall provide prisoner victims with mailing addresses and toll-free phone numbers to outside victim advocates for confidential emotional support services related to sexual abuse.” The MDOC Zero Tolerance Policy, Trifold Brochure provides contact information for reporting sexual abuse and sexual harassment. Via institutional awareness posters, prisoners are also provided the physical address to write for confidential emotional support services. As well, the Law Library contains publications of confidential support and related reporting information for prisoner access. During prisoner interviews, many were aware that this information was provided to them via their Prisoner Guidebook and MDOC Zero Tolerance Policy, Trifold Brochure provided to them during facility Intake. When interviewed, all prisoners knew that the agency provided free rape crisis support services or mental health services to prisoners in need of such assistance. Per the PREA Coordinator, the NCF does not detain prisoners solely for civil immigration purposes.
- (B) Per policy (03.03.140) the agency does provide toll-free telephone calls to rape crisis advocates. Policy (05.03.118, 05.03.130) also allows that communication between prisoners and advocates within these rape crisis centers is as confidential as possible. In speaking with Mailroom staff, it was further noted that outgoing mail to rape crisis centers is not restricted or monitored to any extent greater than any other outgoing general correspondence. Additionally, the agency allows victim advocates to provide prisoners with emotional support related to sexual abuse and sexual harassment. Prisoners are informed, prior to giving them access, of the extent to which communications to rape crisis centers will be monitored and to the extent of which reports of abuse will be forwarded to authorities in accordance to mandatory reporting laws.
- (C) The NCF has negotiated a memorandum of understanding between itself and **Diane Pepler Resource Center** to help provide rape crisis support services as requested by prisoners assigned to the NCF. Agency documentation, as well as conversations with staff from the **Diane Pepler Resource Center**, confirm that the **Diane Pepler Resource Center** does supply advocacy services to NCF prisoners to the greatest extent possible.

## Reasoning & Findings Statement:

This policy works to ensure that prisoners assigned to the NCF have access to outside confidential rape crisis support services and that access is provided in the most confidential manner as possible. Prisoners assigned to the NCF are provided with contact information for a national rape crisis referral network; namely, **Just Detention International**. Additionally, through a MOU with the **Diane Pepler Resource Center**, the NCF is providing rape crisis support services to prisoners when requested. Prisoners are advised that contact with rape crisis centers are subject to monitoring. When interviewed, employees and prisoners knew that the agency provided free emotional support or mental health services to prisoners upon request. As well, many prisoners knew that they could initiate access to those services by using the information posted on the PREA awareness posters predominately displayed throughout the facility. As such, the NCF has met the minimum provisions of this standard.

## Standard 115.54: Third-party reporting

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an prisoner?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC Online Reporting Website Information

- MDOC Prisoner Guidebook, English, June 2014
- MDOC An Inside Line poster, English, 2023
- MDOC An Inside Line poster, Spanish, 2023
- MDOC Zero Tolerance Policy, Trifold Brochure, English, 8-19-22
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- MDOC MOU The Legislative Corrections Ombudsman, 12-17-14
- MDOC MOU Just Detention International, through 9-30-26
- MDOC MOU Diane Pepler Resource Center, 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Random Prisoners
- NCF Website Third Party Reporting Coordinator
- Just Detention International
- Local Rape Crisis Advocacy Center

#### Site Review Observations:

- Review NCF website specific to PREA and third-party reporting methods
- Tested NCF online third-party reporting system.
- Tested *PREA Hotline* number prisoners can use to engage third-party reporting.
- Observed PREA informational postings and other publications throughout the prisoner housing areas.

#### Standard Subsections:

(A) Policy (03.03.140) allows for the use of third-party reporting on allegations of sexual abuse and sexual harassment. During the onsite review, signage throughout the facility encouraged prisoners to third-party report if needed. As well, public notices on PREA reporting, specifically third-party reporting, were available for review by prisoner family and friends via the institutional website. To verify the online reporting system was operational, the auditor submitted a test email to the agency's online reporting address, with responsive comments **being returned in a timely manner**. As well, the *PREA Hotline* used by prisoners was also tested for functionality and service. A response was also received back from the hotline and forwarded to

the agency, as well as the facility, in a timely manner. Investigative reports reflect that NCF staff would accept, and does process, third-party PREA allegations to the same extent as complaints made by affected prisoners. All staff interviewed confirmed that the NCF would accept third-party reports of sexual abuse. As well, most prisoners interviewed believed that the facility would accept allegations of sexual abuse reported by a third party.

#### Reasoning & Findings Statement:

This standard works to ensure a publicly available third-party reporting mechanism exists for claims of sexual abuse and sexual harassment being inflicted upon prisoners. In accordance with policy, the NCF promotes the use of third-party reporting via informational posters spread out across the facility. Electronic contact information is freely distributed on the agency's website to allow the general public direct access to reporting information. To ensure the functionality of the NCF website, all electronic links were tested and found to be operating as required. To ensure the functionality of the NCF online third-party reporting system, a test submission was successfully sent. As well, PREA informational posters and publications also provide prisoners with an agency telephone number, physical addresses, and electronic contact methods that can be used to make third-party reports. While prisoners themselves should not be able to access Internet resources, they can communicate this reference information to their family, friends, and personal advocates. Prisoners themselves are provided state and advocacy addresses to submit third-party correspondence. As well, prisoners may also lodge a third-party party complaint via any staff member or other PREA reporting mechanisms, such as the *PREA Hotline*. The *PREA Hotline* was tested for functionality and service. When interviewed, all staff were aware that the facility would accept and investigate third-party complaints of sexual abuse and sexual harassment from prisoner advocates. Accordingly, the NCF has met the requirements this standard.

## OFFICIAL RESPONSE FOLLOWING AN PRISONER REPORT

### Standard 115.61: Staff and agency reporting duties

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.61 (a)

- 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  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against prisoners or staff who reported an incident of sexual abuse or sexual harassment?  Yes  No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?  Yes  No

#### 115.61 (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  No

#### 115.61 (c)

- 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  No
- Are medical and mental health practitioners required to inform prisoners of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?  Yes  No

#### 115.61 (d)

- 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  No

#### 115.61 (e)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.05.101, In-Service Training, 4-27-15
- MDOC Employee Handbook, 1-15-21

- MDOC New Sergeant Training, PREA
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-11-19
- MDOC PREA Healthcare & Mental Health Training Course Quiz, 2021-2022
- MDOC Training Division, Training Plan: 4-19-22
- National Institute of Corrections, PREA Investigating Sexual Abuse in a Confinement Setting Course
- National PREA Resource Center, PREA Training, 2022
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Individual Training Program Report, PREA, Volunteers: 9-21-22, 10-25-22, 5-22-23, 12-4-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25
- NCF PREA for Health Care and Mental Health: 10-22-25, 6-25-25, 9-30-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- HR Staff
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Prisoners
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

#### Site Review Observations:

- Employee training records

#### Standard Subsections:

(A) Policy (MDOC PREA Manual, 03.03.140) mandates that all employees must immediately report all knowledge, suspicion, or information of any sexual misconduct that occurred within the correctional institution. As well, per HR Staff, employees have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against prisoners or staff for having reported an incident of sexual abuse and sexual harassment. Staff also have an affirmative duty to report any negligence or violation of responsibilities that may have contributed to an incident

of sexual abuse, sexual harassment, or retaliation. Policy (Employee Handbook) notifies all staff that “employees shall immediately report the conduct of another employee that is in violation of Departmental rules, policies, procedures, Director’s Office Memorandums, manuals, etc., to supervisory staff. Failure to report conduct involving drugs, escape, sexual misconduct, sexual harassment, discriminatory harassment, workplace safety or excessive use of force will aggravate the penalty up to and including discharge.” A review of employee training records, as well as training curriculum records, reflects that **all NCF staff** had received initial PREA training, including acknowledgment of their affirmative duty responsibilities. When interviewed, **all staff** confirmed their obligation to immediately report any information they might have regarding allegations of sexual abuse and sexual harassment.

- (B) Policy (PREA Manual) requires that “information related to a sexual abuse and sexual harassment allegations shall not be revealed to anyone other than to the extent necessary for treatment, investigation or other security and management decision.” As such, employees are cautioned to share reported information only with authorized staff. **Random staff interviews** confirm that facility employees are aware of the sensitive and confidential nature of said complaints. In speaking with the NCF PREA Compliance Manager, the totality and reasoning surrounding the confidential investigatory process was clearly explained.
- (C) Policy (03.03.140) requires that medical and mental health practitioners have a duty to disclose their mandatory reporting status, including limitations of confidentiality. During medical/mental health services staff interviews, the need for medical staff to inform prisoners (at the initiation of professional services) of their duty to report, as well as to their limitations of confidentiality, was affirmed.
- (D) All prisoners incarcerated within the NCF are legally classified as adults. As such, there aren’t any juveniles assigned to this facility. However, per policy (03.03.140), “the facility shall report any allegations of alleged victims under the age of 18 or who are considered a vulnerable adult under a state of local vulnerable persons statute to the extent the law requires such reporting.: During the audit time frame, NCF did not have any **(0)** instances of required reporting for vulnerable adults.
- (E) Policy (03.03.140) mandates that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to designated NCF investigators for processing. When interviewing random staff, **all** employees affirmatively responded that any reports of sexual abuse and sexual harassment received by them would be immediately referred to supervisory and/or other entities appropriate for further investigations.

#### Reasoning & Findings Statement:

This standard works to ensure mandatory staff and agency reporting requirements. Both agency and facility policies mandate staffs’ duty to report all allegations of sexual abuse and sexual harassment. Policy further stresses the importance of confidentiality as it applies to reported incidents of sexual abuse and sexual harassment. Lastly, policy requires that all medical and mental health staff disclose their limits of confidentiality and obtain informed consent prior to the initiation of services. In interviewing correctional staff, both uniformed and non-uniformed, all employees expressed an understanding of policy. Training records and course curriculums document correctional staff training specific to

mandatory reporting requirements. In interviewing NCF medical and mental health staff, the process of limited confidential and informed consent used by said staff was explained in detail. As well, training records and course curriculums for the specialized training of medical and investigative staff document an understanding of mandatory reporting requirements. As such, the NCF meets the provisions established within this standard.

## Standard 115.62: Agency protection duties

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.62 (a)

- When the agency learns that an prisoner is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the prisoner?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #05.01.140, Prisoner Placement and Transfer, 4-10-17
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation

- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Prisoners
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Review of retaliation monitoring documentation

Standard Subsections:

(A) Per policy (05.01.140), when the NCF learns that a prisoner is subject to a substantial risk of imminent sexual abuse, agency officials have an affirmative duty to take immediate action to protect the prisoner. In speaking with the NCF PREA Compliance Manager, NCF Facility Warden, NCF Risk Screeners, and Random Staff, a plethora of possible options were discussed specific to prisoner protection measures. Per the PREA Coordinator, during the audit time frame, there weren't any (0) prisoners assigned to the facility was found to be at a substantial risk of sexual abuse. As such, there wasn't any documentation to review.

Reasoning & Findings Statement:

This standard works to actualize the processes of prisoner protection. Agency policy requires staff to take immediate action to ensure the safety of all prisoners who are at a high risk of sexual victimization. Provided there are no other alternative options available to ensure the prisoner's safety, policy allows the facility to immediately increase the safety of the at-risk prisoner by placing said prisoner in the involuntary temporary segregation. However, placement in involuntary temporary segregation housing would only be used if no other general housing assignments available could ensure prisoner safety. During the audit time frame, the NCF did not find any (0) prisoners to be at a substantial risk of sexual abuse. As such, there wasn't any documentation to review. However, in interviewing random staff, all persons were asked specifically what actions would be taken if a prisoner presented as a high risk for sexual victimization. Unequivocally, all staff responded that they would take immediate action to protect the potential victim. Additionally, supervisory staff were questioned as to their role in this potentially dangerous situation. While supervisory staff did provide a more technical and inclusive response, they too, were centrally focused on protecting the prisoner. Hence, the NCF has clearly realized the provisions of this standard.

## Standard 115.63: Reporting to other confinement facilities

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.63 (a)

- Upon receiving an allegation that an prisoner 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  No

### 115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  Yes  No

### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- Agency Head
- NCF Facility Warden
- PREA Compliance Manager

- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

#### Site Review Observations:

- Review of facility-to-facility referral process.
- Reviewed facility-to-facility referral onsite.

#### Standard Subsections:

- (A) MDOC policy (03.03.140) requires that when a facility receives notice regarding allegations of sexual abuse and sexual harassment occurring at another facility, the receiving facility must provide written notice of these allegations to the appropriate facility head of the destination facility within 72 hours. A review of documents within the audit time frame reflects that there have not been any (0) referrals made from NCF to another facility and one (1) referral received by NCF from another facility. In speaking with the NCF Warden, a detailed explanation of the process was provided. As well, documentation review of unit-to-unit notifications supports NCF's adherence to agency policy.
- (B) Per NCF policy (03.03.140), written notice of the aforementioned allegations must be provided as soon as possible, but not more than 72 hours after learning of the allegations. The NCF Warden confirmed that all notices are sent by the Warden's Office to the destination facility as soon as possible, but certainly within 72 hours.
- (C) When received, the NCF does document this notification through the use of electronic mail and by the placement of said allegations into the Department's computerized database in accordance with policy (03.03.140).
- (D) Upon receipt of said allegations, policy (03.03.140) requires that the Warden of the destination facility must then process these allegations in accordance with standard protocol. During the audit time frame, the NCF has received one (1) such allegations from another facility.

#### Reasoning & Findings Statement:

This policy works to ensure agency staff are provided sufficient due process with respect to the timely notification of prisoner allegations involving sexual abuse and sexual harassment. Within the audit time frame, the NCF has not received any (0) incoming allegations of sexual abuse and sexual harassment from prisoners who reported such at another facility. Within the audit time frame, the NCF received one (1) outgoing allegation of sexual abuse and sexual harassment from prisoners who reported to NCF staff that such an incident occurred at another facility. A review of the documentation reflects all notifications were made in a timely manner. As well, the warden provided a detailed explanation of this process, to include required reporting timelines for use when necessary. Hence, agency policy, facility documentation, and an explanation of the collaborative processes all reflect that the NCF has satisfied the provisions of this standard.

### Standard 115.64: Staff first responder duties

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.64 (a)

- Upon learning of an allegation that an prisoner was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?  
 Yes  No
- Upon learning of an allegation that an prisoner 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  No
- Upon learning of an allegation that an prisoner 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  No
- Upon learning of an allegation that an prisoner 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  No

### 115.64 (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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.05.101, In-Service Training, 4-27-15
- MDOC Program A, Correctional Facilities Administration Security Regulations, New Employees, Contractors, and Volunteer Training, September 2019
- MDOC Program A, Correctional Facilities Administration Security Regulations, New Employees, Contractors, and Volunteer Training, September 2019
- MDOC New Sergeant Training, PREA
- MDOC PREA Healthcare & Mental Health Training Course Quiz, 2021-2022
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Sexual Violence Response and Investigation Guide, 2015
- National PREA Resource Center, PREA Training, 2022
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Individual Training Program Report, PREA, Volunteers: 9-21-22, 10-25-22, 5-22-23, 12-4-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25
- NCF PREA for Health Care and Mental Health: 10-22-25, 6-25-25, 9-30-25

#### Interviews:

- Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Intermediate or Higher-Level Facility Staff
- Random Staff
- First Responders
- Random Prisoners
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

#### Site Review Observations:

- Review of employee training records.
- Review of investigator narrative case files.

#### Standard Subsections:

(A) Policy (NCF #03.03.140, MDOC Sexual Violence Response and Investigation Guide) requires the first responding security staff member to immediately separate the alleged victim and abuser. After ensuring the safety of the victim, policy (NCF #03.03.140, MDOC Sexual Violence Response and

Investigation Guide) requires staff to preserve and protect the crime scene until evidence collection is possible. If the first responder learns that the victim has been sexually abused, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Once the first responder learns that a prisoner has been sexually abusive, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Within the audit time frame, NCF has received six (6) allegations from prisoners who claim to have been victims of sexual abuse. Interviews with first responders, as well as documentation related to such, reflects that staff took the appropriate actions required of their role consistent with policy. As well, during volunteer and contractor interviews, it was noted that all volunteers and contractors understood the absolute need to protect the victim, as well as a need to preserve and protect the crime scene or evidence that could be available.

(B) Policy (NCF #03.03.140, MDOC Sexual Violence Response and Investigation Guide) requires that non-security first responders contain and assess the situation, notify their immediate supervisor or the security shift supervisor, instruct the victim not to take any action that could destroy physical evidence, and report the specific details, in writing, to the security shift supervisor as soon as possible, and no later than the end of the day. Within the audit time frame, NCF has received six (6) allegations from prisoners who claim to have been victims of sexual abuse. In this, none (0) of those claims were made to non-security staff. Interviews with first responders, as well as documentation related to such, reflects that NCF security and non-security staff, when notified, took the appropriate actions required of their role consistent with policy.

#### Reasoning & Findings Statement:

This standard works to determine whether facility staff understand their role when responding to prisoner allegations of sexual abuse and sexual harassment. Of primary importance is separating and securing the alleged victim and abuser. Of this, all staff interviewed absolutely articulated that point. The majority of staff then articulated the need to preserve any evidence possibly remaining at the crime scene and on the alleged victim. A review of employee training records and class curriculums reflect staff have received required training specific to the preservation of evidence regarding allegations of sexual abuse and sexual harassment. The immediate notification of a security supervisor provides assurance that all subsequent critical steps will be followed. This information, combined with agency policy, staff, volunteer, and contractor interviews, facility training documentation, as well as the review of documentation related to the PREA initiation process sufficiently supports the expectations required by this standard.

## Standard 115.65: Coordinated response

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.05.101, In-Service Training, 4-27-15
- MDOC New Sergeant Training, PREA
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- National PREA Resource Center, PREA Training, Part 1-10, 2022
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Individual Training Program Report, PREA, Volunteers: 9-21-22, 10-25-22, 5-22-23, 12-4-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25
- NCF PREA for Health Care and Mental Health: 10-22-25, 6-25-25, 9-30-25

#### Interviews:

- PREA Coordinator
- Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation

- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Helen Newberry Joy Hospital & Healthcare Center
- Random Staff

Site Review Observations:

- Review of departmental level facility processes

Standard Subsections:

- The NCF has developed a written institutional plan; namely, NCF #03.03.140, Prison Rape Elimination Act (PREA) And Prohibited Sexual Conduct Involving Prisoners, 12-18-23, to coordinate actions amongst first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This provision works to coordinate facility efforts so that victims of sexual abuse and sexual harassment receive adequate support services. To coordinate facility efforts in the most efficient manner possible, the NCF implemented a unit-based policy, NCF #03.03.140, that details the coordinated response plan to an incident of prisoner sexual abuse. In this, the roles of all facility staff are discussed and, perhaps even more importantly, the way those roles interact with one another are outlined. This policy is a conveniently written overview of departmental responsibilities, equipped with notification and referral reminders. When asked, various departmental staff were able to articulate their role in the response process. As well, during prisoner interviews, many were able to articulate the responsibilities of responding staff; thus, demonstrating this process has been institutionalized within the facility. As such, the NCF has met all the provisions within this standard.

## Standard 115.66: Preservation of ability to protect prisoners from contact with abusers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.66 (a)

- 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 limits the agency's ability to remove alleged staff sexual abusers from contact with any prisoners pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

## 115.66 (b)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC MOU AFSCME, 2022-2024
- MDOC MOU MCO Security Unit, 2022-2024
- MDOC MOU MSEA, 2022-2024
- MDOC MOU SEIU 517M HSS Unit, 2022
- MDOC MOU SEIU 517M S&E Bargaining Unit, 2022
- MDOC MOU SEIU 517M Technical Unit Bargaining Unit, 2022
- MDOC MOU UAW Administrative Support and Human Services Bargaining Units, 2021
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- Agency Head
- Agency Contract Administrator
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Administrative (Human Resources) Staff
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Reviewed agency labor contracts.

Standard Subsections:

(A) Per policy (PREA Manual), both the agency, as well as any other governmental entity responsible for collective bargaining on the agency's behalf, are prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with prisoners pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Current contracts between the State of Michigan and numerous employees' associations, ensures that the MDOC, and by extension, the NCF, retains the management rights for facilitates to remove alleged staff sexual abusers from contact with prisoners pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

(B) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This provision allows the agency to protect prisoners from having contact with sexual abusers and sexual harassers. As necessary, policy allows for employees to be removed from prisoner contact pending the outcome of a sexual abuse or sexual harassment investigation. In speaking with investigative staff and the NCF Warden, the process of removing an employee from prisoner contact, as well as suspending or separating an employee from employment as a function of a negative sexual abuse or sexual harassment investigation finding, was explained. It was also noted that the MDOC; more specifically, the NCF unit administration, has no reservations about discharging employees for engaging in sexual abuse and sexual harassment. Hence, the NCF has satisfactorily met all provisions within this standard.

## Standard 115.67: Agency protection against retaliation

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.67 (a)

- Has the agency established a policy to protect all prisoners and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other prisoners or staff?  Yes  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

#### 115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for prisoner victims or abusers, removal of alleged staff or prisoner abusers from contact with victims, and emotional support services, for prisoners or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?  Yes  No

#### 115.67 (c)

- 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 prisoners or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by prisoners or staff?  Yes  No
- 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 prisoners who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by prisoners or staff?  Yes  No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  Yes  No
- 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 prisoner disciplinary reports?  Yes  No
- 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 prisoner housing changes?  Yes  No
- 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 prisoner program changes?  Yes  No
- 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  No
- 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  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of prisoners, does such monitoring also include periodic status checks?  
 Yes  No

### 115.67 (e)

- 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  No

### 115.67 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Institutional Investigator
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Random Prisoners
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

#### Site Review Observations:

- Reviewed sexual abuse/harassment case files.
- Reviewed retaliation monitoring logs.
- Reviewed process for utilizing retaliation monitoring logs.

#### Standard Subsections:

- (A) Policy (03.03.140) prohibits retaliation for reporting sexual abuse or sexual harassment and for cooperating with a sexual abuse and sexual harassment investigations. In accordance with these policies, the designated NCF staff monitor all retaliation resulting from cases of sexual abuse and sexual harassment.
- (B) Per policy (PREA Manual), the "Department shall monitor for changes that may suggest possible retaliation by prisoners or staff." In doing that, retaliation monitors will employ multiple protection measures, such as monitoring for housing or program changes, providing emotional support, as well as conducting periodic status checks with prisoners and staff who fear retaliation for reporting sexual misconduct or for cooperating with investigations.
- (C) Per policy (PREA Manual), for a minimum of 90 calendar days following a report of sexual abuse or sexual harassment, the facility shall monitor the conduct and treatment of prisoners and staff who have reported sexual abuse or cooperated with sexual abuse investigations. Per the PREA Manual, "the Department shall act promptly to remedy any retaliation including employing protection measures such as housing changes, transfers, changes of alleged staff work assignment, and continue such monitoring beyond 90 calendar days if the initial monitoring indicates a need." Within the audit time frame, there have not been any (0) acts of retaliation noted for having engaged the PREA process.
- (D) Per policy (PREA Manual), in the case of prisoners, such monitoring shall also include periodic in-person status checks at least every 30 days. As noted by a retaliation monitor, and in excess of standard requirements, in-person status checks are routinely performed every two weeks.
- (E) Per policy (PREA Manual), if any other individual (staff, volunteer, contractor, prisoner, adolescent prisoner, resident, etc.) who cooperates with an investigation expresses a fear of retaliation, the facility and agency shall take appropriate measures to protect that individual against retaliation. Documentation reflects that within the audit time frame, there have not been any (0) expressed concerns of fear for retaliation due to having cooperated with, or having engaged, the PREA process.
- (F) The auditor is not required to audit this provision.

#### Reasoning & Findings Statement:

This standard works to prevent retaliation against employees and prisoners for reporting sexual abuse and sexual harassment or for having cooperated with an investigation into such. MDOC policy provides a comprehensive overview of agency protection against sexual abuse and sexual harassment. Both the PREA Compliance Manager and the NCF Retaliation Monitors provided detailed explanations of the monitoring process. Monitoring details of case files associated with prisoners was reviewed. All prisoners associated with these files who remained assigned to the NCF were monitored for at least 90

days following the allegations. In excess of the standard requirements, said checks are routinely performed approximately every two weeks. Given the totality of the policies provided, document review, staff knowledge regarding the process, and in-person status checks being conducted approximately every two weeks, the NCF **has exceeded the basic** provisions of this standard.

## Standard 115.68: Post-allegation protective custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.68 (a)

- Is any and all use of segregated housing to protect a prisoner who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #04.05.120, Segregation Standards, 6-1-19
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Random Prisoners
- Prisoners Who Reported Sexual Abuse

- Prisoners Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Observed custody housing throughout the facility.

Standard Subsections:

(A) Policy (04.05.120) prohibits placing prisoners who allege sexual abuse, or those found to be at a high risk of sexual abuse, in involuntary temporary segregation unless an assessment of all other available alternatives has been made and a subsequent determination concludes that there are no available alternatives means of separation from likely abusers. As noted by the NCF Warden and NCF PREA Compliance Manager, within the audit time frame, the NCF has not placed any (0) prisoners who have alleged sexual abuse or who are at a high risk of sexual abuse in the involuntary temporary segregation pending completion of their assessment.

Reasoning & Findings Statement:

Agency policy strictly prohibits the use of involuntary temporary segregation as a de facto response to prisoner safety concerns. Rather, as explained by the PREA Compliance Manager and NCF Warden, the use of involuntary temporary segregation should be considered only as the last available option, and even at that, as only a temporary measure. While conversations with the NCF Warden and the PREA Compliance Manager noted that the NCF has not place any (0) prisoners alleging sexual abuse or sexual harassment within involuntary temporary segregation as a direct result of having made said allegations. As such, the NCF has satisfied the requirements of this standard.

## INVESTIGATIONS

### Standard 115.71: Criminal and administrative agency investigations

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).]  Yes  No  NA
- 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  No  NA

#### 115.71 (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  No

#### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  
 Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

#### 115.71 (d)

- 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  No

#### 115.71 (e)

- 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 prisoner or staff?  Yes  No
- Does the agency investigate allegations of sexual abuse without requiring an prisoner who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?  Yes  No

#### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No
- 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  No

#### 115.71 (g)

- 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  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  
 Yes  No

#### 115.71 (i)

- 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  No

#### 115.71 (j)

- 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  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #01.01.140, Internal Affairs, 8-8-22
- MDOC New Sergeant Training, PREA
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-11-19

- MDOC Sexual Violence Response and Investigation Guide, 2015
- MDOC PREA Administrator Memo, 7-15-22
- Department of Michigan State Police, Memo of PREA Assurance, 9-30-15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Prisoners Who Reported Sexual Abuse
- Prisoners Who Disclosed Sexual Victimization During Risk Screening

#### Site Review Observations:

- Reviewed investigator training certifications.
- Reviewed agency training records documenting investigator training curriculums.
- Reviewed **eleven (11) sexual** abuse/sexual harassment case files.

#### Standard Subsections:

- (A) Policy (PREA Manual) requires that when the institution conducts its own investigation into allegations of sexual abuse and sexual harassment, it shall do so “promptly, thoroughly, and objectively” for all allegations, including third-party and anonymously.
- (B) Policy (03.03.140) requires investigators to have received specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. In interviewing the PREA Compliance Manager and the NCF Institutional Investigator, said staff confirmed participation in numerous related courses, to include NIC’s Investigating Sexual Abuse in a Confinement Setting. Additionally, training curriculums and employee training certifications provide additional documentation to support facility compliance.
- (C) Per policy (PREA Manual), “the facility shall coordinate the actions of the investigators, first responders, law enforcement and forensic examiners to ensure the available direct and circumstantial evidence is gathered and preserved, including any physical DNA evidence and available electronic monitoring data.” Policy (PREA Manual, 03.03.140) allows that Institutional Investigators will interview alleged victims, suspected perpetrators, and witnesses. Institutional Investigators are also required to review prior reports and complaints of sexual abuse involving the suspected perpetrator.

- (D) As noted by the NCF Institutional Investigator, compel interviews would only be conducted after consulting with the MSP to determine if compelled interviews may be problematic for subsequent judicial hearings, if deemed appropriate.
- (E) As noted by the NCF Institutional Investigator, the credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and not based on that individual's status as a prisoner or staff member. As noted by the NCF Institutional Investigator, the use of a polygraph test or other truth-telling device as a condition of investigating allegations of sexual abuse or sexual harassment is prohibited. The Institutional Investigator further confirmed that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Reviewed documentation supports adherence to this criterion.
- (F) Policy (PREA Manual, 03.03.140) requires administrative investigations to consider whether staff actions or failures to act contributed to the sexual abuse and sexual harassment. All administrative investigations are documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence and testimonial evidence, the reasoning behind credible assessments, as well as investigative facts and findings. The NCF Institutional Investigator confirms that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Reviewed documentation supports the facility's adherence to this policy.
- (G) Policy (PREA Manual, 03.03.140) requires that all criminal investigations are documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence, testimonial evidence, and documentary evidence. Interviews with investigative staff, as well as reviewed documentation, supports the facility's adherence to this policy.
- (H) As noted by the Institutional Investigator and required by policy (PREA Manual, 03.03.140), all substantiated allegations of conduct that appear to be criminal in nature are referred for prosecution via the Michigan State Police (MSP). Interviews with investigative staff, as well as reviewed documentation, supports the facility's adherence to this policy. During the audit time frame, the NCF **has not been required to refer any (0)** such cases for prosecution through the Michigan State Police.
- (I) Policy (PREA Manual) requires that all NCF "investigative reports relating to sexual abuse allegations shall be retained for as long as the alleged abuser is incarcerated or employed by the Department, plus five years." After that time, the documents may be shredded or otherwise deleted. Interviews with investigative staff, as well as reviewed documentation, supports the facility's adherence to this policy.
- (J) As required by policy (03.03.140), "the investigation shall not be closed simply due to the resignation, transfer, or termination of the accused employee." Interviews with investigative staff, as well as reviewed documentation, supports the facility's adherence to this policy.
- (K) The auditor is not required to audit this provision.

(L) Policy (PREA Manual, 03.03.140, 01.01.140) requires facility staff to cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. In speaking with the NCF Institutional Investigator, it was noted that the MSP, per a MOU between NCF and MSP, has authority to conduct investigations of sexual abuse and sexual harassment within the MDOC. When necessary, the Institutional Investigator helps to coordinate investigative efforts between agency staff and the MSP, thus ensuring that NCF staff remain informed on the progress of all sexual abuse investigations.

#### Reasoning & Findings Statement:

NCF Institutional Investigators conduct its administrative investigations of sexual abuse and sexual harassment. To help ensure effective investigations, all such staff have received training in conducting sexual abuse and sexual harassment investigation in a confinement setting. NCF Institutional Investigators have been trained in the collection of evidence, as well as interviewing victims, suspected perpetrators, and witnesses. Said staff have been trained on the standards of evidence required to support a finding of guilt in administrative cases, as well as due process and procedural requirements of criminal cases. As confirmed through interviews with NCF Investigative Staff, when coordinating with outside law enforcement agencies, namely the Michigan State Police, NCF staff work collaboratively under a memorandum of understanding to facilitate communication between the two agencies. Lastly, it is noted that all substantiate allegations of sexual abuse are referred to the MSP to determine if the allegations necessitate a criminal investigation and/or subsequent criminal prosecution. During the audit time frame, the NCF **has not been required to refer any (0)** such cases for prosecution through the Michigan State Police. As such, the NCF has met the requirements of this standard.

## Standard 115.72: Evidentiary standard for administrative investigations

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.72 (a)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #01.01.140, Internal Affairs, 8-8-22
- MDOC New Sergeant Training, PREA
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-11-19
- MDOC Sexual Violence Response and Investigation Guide, 2015
- MDOC PREA Administrator Memo, 7-15-22
- Department of Michigan State Police, Memo of PREA Assurance, 9-30-15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25

#### Interviews:

- MDOC PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff

#### Site Review Observations:

- Reviewed procedures for processing sexual abuse/sexual harassment allegations.
- Reviewed **eleven (11)** sexual abuse and sexual harassment case files.

#### Standard Subsections:

(A) Policy (PREA Manual) clearly establishes the standard of proof required to substantiate claims of sexual abuse and sexual harassment. The PREA Manual requires that the MDOC shall not impose “a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.” Specifically, per the NCF Institutional Investigator, the allegations are determined substantiated, unsubstantiated, or unfounded based on the preponderance of the evidence. For substantiated claims, this simply means that the weight of the evidence must indicate that the allegations are more likely to be true than not true.

## Reasoning & Findings Statement:

Agency policy requires that the NCF establish a standard of proof no higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated. When interviewed, the PREA Compliance Manager and the NCF Institutional Investigators confirmed that standard of proof to be slightly more than half. As such, the NCF has satisfied all material provisions for this standard.

## Standard 115.73: Reporting to prisoners

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.73 (a)

- Following an investigation into an prisoner's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the prisoner as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?  Yes  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an prisoner'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 prisoner? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- Following an prisoner's allegation that a staff member has committed sexual abuse against the prisoner, unless the agency has determined that the allegation is unfounded, or unless the prisoner has been released from custody, does the agency subsequently inform the prisoner whenever: The staff member is no longer posted within the prisoner's unit?  Yes  No
- Following an prisoner's allegation that a staff member has committed sexual abuse against the prisoner, unless the agency has determined that the allegation is unfounded, or unless the prisoner has been released from custody, does the agency subsequently inform the prisoner whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an prisoner's allegation that a staff member has committed sexual abuse against the prisoner, unless the agency has determined that the allegation is unfounded, or unless the prisoner has been released from custody, does the agency subsequently inform the prisoner whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No
- Following an prisoner's allegation that a staff member has committed sexual abuse against the prisoner, unless the agency has determined that the allegation is unfounded, or unless the prisoner has been released from custody, does the agency subsequently inform the prisoner

whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

- Following an prisoner's allegation that he or she has been sexually abused by another prisoner, 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  No
- Following an prisoner's allegation that he or she has been sexually abused by another prisoner, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?  
 Yes  No

#### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No

#### 115.73 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #01.01.140, Internal Affairs, 8-8-22
- MDOC New Sergeant Training, PREA
- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Trainer Manual, 6-11-19

- MDOC Basic Investigator Training, Interview and Investigation Techniques and Fundamentals, Participant Manual, 6-11-19
- MDOC Basic Investigator Training, Participant Attachments, 6-11-19
- MDOC Sexual Violence Response and Investigation Guide, 2015
- MDOC PREA Administrator Memo, 7-15-22
- MDOC PREA Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Findings and Actions form, 12/13
- Department of Michigan State Police, Memo of PREA Assurance, 9-30-15
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025
- NCF Basic Investigator Training: 10-25-19, 10-30-19, 12-11-19, 8-23-24a, 8-23-24b, 11-8-24
- NCF Sexual Abuse Investigations in a Confinement Setting: 1-24-25

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Investigative Staff

#### Site Review Observations:

- Reviewed procedures for processing sexual abuse and sexual harassment allegations.
- Reviewed eleven (11) sexual abuse and sexual harassment case files.

#### Standard Subsections:

- (A) Policy (PREA Manual) requires that “following investigation of an allegation a prisoners suffered sexual abuse in a facility, the appropriate Warden or Administrator shall ensure the victim is notified in writing as to whether the allegation has been Substantiated/Sufficient Evidence, Unsubstantiated/Insufficient Evidence or Unfounded/No Evidence.” In speaking with the NCF Institutional Investigator, it was noted that all prisoners are notified in writing of an investigative disposition at the conclusion of the investigation.
- (B) Policy (03.03.140) further requires that if the NCF did not conduct the investigation, it shall “be coordinated as necessary with the investigating law enforcement agency to ensure the Department’s efforts will not be an obstacle for prosecution and to remain informed of the status of the investigation.” In speaking with NCF Institutional Investigator, the communication process between institutional staff and Department of Michigan State Police troopers was discussed. As noted by the Institutional Investigator, during the audit time frame, all investigative findings by the MSP were conveyed to the NCF for prisoner notification.
- (C) Policy (PREA Manual) requires that when a prisoner has filed allegations of sexual abuse against a staff member (unless unfounded), the institutional investigator shall inform the prisoner upon the following:

- a. Any disciplinary action is taken. However, details of the discipline including the specific charges and sanctions shall not be provided;
- b. The staff member is no longer posted within the prisoner's unit;
- c. The staff member is no longer employed at the facility;
- d. The Department learns that the staff member has been indicted on a charge related to sexual abuse within the facility;
- e. The Department learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

(D) Policy (PREA Manual) requires that when a prisoner has filed allegations of sexual abuse against another prisoner, the agency must notify the prisoner whenever the alleged abuser has been:

- a. Indicted on a charge related to sexual abuse within the facility and
- b. Whenever the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

(E) Policy (PREA Manual) requires that the agency issue in writing, using a PREA Prisoner Notification of Sexual Abuse and Sexual Harassment Investigative Findings and Action Form, all notifications or attempted notifications regarding disposition to prisoner allegations of sexual abuse and/or sexual harassment. Interviews with the PREA Compliance Manager and the NCF Institutional Investigator confirm adherence to said policy. As well, a review of documented notifications included within NCF case files supports said adherence.

(F) Auditor is not required to audit this provision.

#### Reasoning & Findings Statement:

The NCF conducts all administrative sexual abuse and sexual harassment investigations. While all criminal sexual abuse and sexual harassment claims are addressed by the MSP, agency staff do remain actively engaged in those investigations. Agency policy requires NCF staff to provide prisoners with written dispositions for all claims of sexual abuse and sexual harassment. Agency policy further provides that all prisoners who have filed a previously substantiated sexual abuse and sexual harassment claims against agency staff or other prisoners, receive notification upon a change in housing status for the prisoner or a change in job status for the employee. Lastly, policy requires these notifications to be documented. In documenting said notification, it should also be noted that the PREA Manual requires that "following investigation of an allegation a prisoners suffered sexual abuse in a facility, the appropriate Warden or Administrator shall ensure the victim is notified in writing as to whether the allegation has been Substantiated/Sufficient Evidence, Unsubstantiated/Insufficient Evidence or Unfounded/No Evidence." Within the audit time frame, NCF documentation reflects prisoners are notified of the final disposition of sexual abuse and sexual harassment claims as required by policy. Also, in speaking with prisoners who have filed sexual abuse and sexual harassment claims, these persons generally state that they were provided with a final disposition to their claims. As such, the NCF is operating in accordance with all the provisions of this standard.

## DISCIPLINE

### Standard 115.76: Disciplinary sanctions for staff

## All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

### 115.76 (c)

- 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  No

### 115.76 (d)

- 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  No
- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

## Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17

- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #02.03.100, Employee Discipline, 2-1-21
- MDOC #03.03.130, Humane Treatment and Living Conditions for Prisoners, 4-1-22
- MDOC Employee Handbook, 1-15-21
- Michigan Penal Code (Excerpt), 750.520c, Criminal sexual conduct in the second degree; felony
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- MDOC PREA All Employees Course Quiz Questions, 2021-2022
- National PREA Resource Center, PREA Training, Part 1-10, 2022
- NCF 2025 PREA Training: October 1, 2024 – July 29, 2025

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Random Staff

#### Site Review Observations:

- Review of staff disciplinary protocols for sexual abuse and sexual harassment determinations

#### Standard Subsections:

- (A) Policy (Employee Handbook) clearly advises staff that all employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policies. Interviews with the NCF PREA Compliance Manager, NCF HR Staff, NCF Facility Warden, and the NCF Institutional Investigator confirm the facility adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Interviews with random staff reflect employee awareness to zero-tolerance policies for engaging in sexual abuse and sexual harassment of prisoners.
- (B) Policies (PREA Manual, Employee Handbook, 02.03.100, 03.03.140, 03.03.130) continue by noting that any perpetrator of a sexual abuse or sexual harassment will be dealt with through discipline or prosecution to the fullest extent permitted by law. In this, termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of a prisoner. During the audit time frame, there have not been any (0) staff members found to have engaged in acts of sexual abuse or sexual harassment. During the audit time frame, there have not been any (0) staff members terminated due to having engaged in an appropriate sexual relationship with a prisoner.
- (C) Policy (PREA Manual) stipulates disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment “(other than actually engaging in sexual abuse) shall be 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.” Interviews with the NCF PREA Compliance Manager, NCF HR Staff, NCF

Warden, and NCF Institutional Investigators confirm the facility’s adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Within the audit time frame, there **have not been any (0)** staff members assigned to the NCF disciplined, short of termination, for violations of agency policy related to sexual abuse or sexual harassment.

(D) Policy (PREA Manual) notes that the Department shall “report to law enforcement agencies” any instances of potential criminal sexual offenses committed by staff. Within the audit time frame, **there have not been any (0)** staff members reported to law enforcement for violating the agency’s sexual abuse or sexual harassment policies.

#### Reasoning & Findings Statement:

This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in sexual abuse or sexual harassment of prisoners. The State of Michigan, as well as the MDOC, has made the consequences of engaging in such behavior exceptionally clear. Within the audit time frame, **there has not been any (0)** staff members assigned to the NCF who have violated aspects of the agency’s sexual abuse or sexual harassment policies. During staff interviews, all staff expressed their knowledge of the agency’s zero tolerance policy. In total, the MDOC, as well as NCF administration, has satisfied the provisions of this standard.

### Standard 115.77: Corrective action for contractors and volunteers

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with prisoners?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

##### 115.77 (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 prisoners?  Yes  No

#### Auditor Overall Compliance Determination

**Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC Investigations of Contractual Employees Memo, 12-27-16
- Michigan Penal Code (Excerpt), 750.520c, Criminal sexual conduct in the second degree; felony
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Individual Training Program Report, PREA, Contractors: 10-10-22, 6-5-23, 6-22-23, 7-14-23, 8-21-23, 12-11-23, 6-3-24, 7-2-24, 10-3-23, 12-13-23, 12-14-23, 12-18-23
- NCF Individual Training Program Report, PREA, Volunteers: 9-21-22, 10-25-22, 5-22-23, 12-4-23
- NCF Medical Contractor PREA Training: 8-25-25a, 8-25-25b

#### Interviews:

- Agency Contract Administrator
- NCF Facility Warden
- Investigative Staff
- Administrative (Human Resources) Staff
- Contractors Who May Have Contact with Prisoners
- Volunteers Who May Have Contact with Prisoners

#### Site Review Observations:

- Review contractor/volunteer files

#### Standard Subsections:

(A) Policy (03.03.140) advises that any contractual employee or volunteer who engages sexual abuse or sexual harassment of prisoners "shall be prohibited from providing services within any Department correctional facility." Policy (PREA Manual) further notes that "any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with prisoners and shall be reported to law enforcement agencies." Interviews with volunteers and contracted staff evidenced that the agency's zero-tolerance policy is institutionalized. A review of

contractor/volunteer files and PREA training materials indicates that all such persons are aware of agency policy regarding the sexual abuse and sexual harassment of prisoners. During the audit time frame, there weren't any (0) contractors or volunteers found to have violated agency sexual abuse or sexual harassment policies.

(B) Policy (PREA Manual) states that “the facility shall take appropriate measures and shall consider whether to prohibit further contact with prisoners, in the case of any other violation of Department sexual abuse or sexual harassment policies by a contractor or volunteer. Interviews with contracted staff evidenced that the agency’s zero-tolerance policy was institutionalized. A review of contractor/volunteer files and PREA training materials indicates that all such persons are aware of agency policy regarding the sexual abuse and sexual harassment of prisoners. During the audit time frame, there weren't any (0) contractors or volunteers found to have violated agency sexual abuse or sexual harassment policies.

#### Reasoning & Findings Statement:

Policy expressly states that contractors and volunteers who engage in sexual abuse with prisoners will be removed from contact with prisoners pending the outcome of the investigation. Contractors or volunteers who engage in sexual abuse will be reported to law enforcement and to any relevant licensing body. These persons will also be subject to criminal sanctions. During the audit time frame, the NCF has not had any (0) contractors or volunteers engage in sexual abuse or harassment of any prisoner. During NCF volunteer and contractor interviews, both the prohibition against sexual abuse and sexual harassment of prisoners, as well as the consequences of having engaged such, were clearly known. Documentation of volunteer and contractor training records further supports this assertion. Hence, the provisions of this standard have been met and NCF is in compliance with this standard.

### Standard 115.78: Disciplinary sanctions for prisoners

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.78 (a)

- Following an administrative finding that an prisoner engaged in prisoner-on-prisoner sexual abuse, or following a criminal finding of guilt for prisoner-on-prisoner sexual abuse, are prisoners subject to disciplinary sanctions pursuant to a formal disciplinary process?  Yes  No

##### 115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the prisoner’s disciplinary history, and the sanctions imposed for comparable offenses by other prisoners with similar histories?  Yes  No

##### 115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an prisoner’s mental disabilities or mental illness contributed to his or her behavior?  Yes  No

#### 115.78 (d)

- 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 prisoner to participate in such interventions as a condition of access to programming and other benefits?  Yes  No

#### 115.78 (e)

- Does the agency discipline an prisoner for sexual contact with staff only upon a finding that the staff member did not consent to such contact?  Yes  No

#### 115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?  Yes  No

#### 115.78 (g)

- If the agency prohibits all sexual activity between prisoners, does the agency always refrain from considering non-coercive sexual activity between prisoners to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between prisoners.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #03.03.105, Prisoner Discipline, 4-18-22

- MDOC #03.04.100, Health Services, 4-12-21
- Michigan Penal Code (Excerpt), 750.520c, Criminal sexual conduct in the second degree; felony
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF PREA Prisoner Information Verification-72 Hour: 2-10-20, 2-9-24, 10-14-24, 5-2-25, 5-7-25, 5-21-25, 5-30-25, 6-5-25, 6-6-25, 6-27-25a, 6-27-25b, 7-18-25, 7-23-25, 8-1-25a, 8-1-25b, 8-5-25, 8-6-25, 8-22-25, 8-27-25
- NCF PREA Prisoner Information Verification-30 Day: 3-5-24, 4-25-24, 11-13-24, 5-6-25, 6-2-25, 6-17-25, 6-25-25a, 6-25-25b, 6-30-25, 7-1-25, 7-22-25, 7-26-25, 8-6-25, 8-10-25, 8-25-25a, 8-25-25b, 9-1-25, 9-3-25

#### Interviews:

- NCF Facility Warden
- PREA Compliance Manager
- Investigative Staff
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Prisoners

#### Site Review Observations:

- Review of the prisoner disciplinary process.

#### Standard Subsections:

- (A) Policy (PREA Manual, 03.03.140, 03.03.105) provides the standards associated with all disciplinary hearings, to includes hearings related to prisoner-on-prisoner sexual abuse/sexual harassment. Policy (PREA Manual, 03.03.140, 03.03.105) further notes that following an administrative finding that a prisoner engaged in prisoner-on-prisoner sexual abuse, said prisoner is subject to disciplinary sanctions pursuant to formal disciplinary processes. During the audit time frame, the NCF has not had any (0) administrative findings of prisoner-on-prisoner sexual abuse.
- (B) Policy (PREA Manual, 03.03.140, 03.03.105) ensures that disciplinary sanctions imposed are commensurate with the nature and circumstances of the abuse committed, the prisoner's disciplinary history, and the sanctions imposed for comparable offenses by other prisoners with similar histories. As well, sanctions consider aggravating and mitigating factors. A review of disciplinary hearing processes supports adherence to this policy.
- (C) When determining a prisoner's disciplinary sanctions, policy (PREA Manual, 03.03.140, 03.03.105) does consider how a prisoner's mental disabilities or mental illness contributed to his behavior. The NCF disciplinary process reflects that the mental disabilities of prisoners are, in fact, given consideration during the disciplinary process. A review of the disciplinary hearing process does reflect the mental state of prisoners is given consideration during the sentencing phase of disciplinary proceedings.

- (D) Per policy (PREA Manual, 03.03.140, 03.03.105, #03.04.100), prisoners found guilty of sexual abuse shall be given appropriate programming and interventions if determined to be necessary by mental health services in consultation with sex offender services. As noted by NCF Mental Health staff, programming and/or interventions services are provided to prisoners found to have engaged in sexual abuse.
- (E) Per policy (PREA Manual, 03.03.105), the NCF may discipline a prisoner for sexual contact and/or sexual conduct with staff, volunteers, or contractors only upon finding out that person did not consent to such contact or conduct.
- (F) Per policy (PREA Manual, 03.03.140, 03.03.105), a report made in good faith based upon a reasonable belief that the alleged conduct did occur does not constitute falsely reporting an incident or lying for the purpose of disciplinary action, even if the investigation does not establish evidence sufficient to substantiate the allegations.
- (G) Per policy (PREA Manual), the agency clearly distinguishes between consensual sex, which is still a violation of agency policy, and prisoner-on-prisoner sexual abuse, which is defined as the result of coerced consent or protective pairing.

Reasoning & Findings Statement:

The prisoner disciplinary process is a formal means to address institutional misconduct. The NCF uses a progressive disciplinary system, which allows for consideration of aggravating and mitigating factors. Within the audit time frame, the NCF has not processed any (0) administrative finding of guilt regarding prisoner-on-prisoner sexual abuse that occurred at the facility. A review of documentation reflects that the mental health and of a prisoner is given serious consideration in sentencing and availability of subsequent mental health services. In considering agency policies, facility procedures, staff interviews, and prisoner comments, NCF is compliant with the disciplinary provisions as required under this standard.

## MEDICAL AND MENTAL CARE

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

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison prisoner has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the prisoner 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    No    NA

#### 115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison prisoner has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the prisoner 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  No  NA

#### 115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail prisoner has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the prisoner is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?  Yes  No

#### 115.81 (d)

- 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  No

#### 115.81 (e)

- Do medical and mental health practitioners obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the prisoner is under the age of 18?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25

- MDOC #03.04.108, Prisoner Health Information, 7-8-19
- MDOC #03.04.100, Health Services, 4-12-21
- MDOC PREA Authorization for Release of Information, 12/13
- MDOC Informed Consent Poster, English and Spanish
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF Prisoner Assessments, 72-Hours: 2-9-24, 10-14-24, 5-7-25, 5-21-25, 5-22-25, 5-23-25, 5-30-25, 6-5-25, 6-6-25, 6-27-25a, 6-27-25b, 7-9-25, 7-16-25, 7-18-25, 7-23-25, 7-25-25, 8-1-25a, 8-1-25b, 8-5-25, 8-6-25, 8-20-25, 8-22-25, 9-1-25
- NCF Prisoner Assessments, 30 Days: 3-5-24, 11-12-24, 6-2-25, 6-25-25a, 6-25-25b, 6-27-25a, 6-27-25b, 6-30-25a, 6-30-25b, 7-22-25a, 7-22-25b, 8-6-25, 8-10-25, 8-11-25, 8-12-25, 8-20-25, 8-25-25a, 8-25-25b, 8-25-25c, 8-27-25, 9-3-25
- NCF Current Designations Report: 7-22-25
- NCF Mental Health Referral: 8-2-24, 9-13-24, 11-8-24, 1-9-25, 3-21-25, 4-14-25, 5-14-25

#### Interviews:

- PREA Compliance Manager
- Intake Staff
- Investigative Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Prisoners Who Reported Sexual Victimization During Risk Screening

#### Site Review Observations:

- Observed Medical Department and Risk Screening Areas.
- Review of Medical/Mental Health PREA Screening Forms.
- Reviewed **eleven (11)** investigation files.

#### Standard Subsections:

(A) Policy (PREA Manual) requires that upon arrival, all NCF prisoners will be screened for sexual abuse risk factors. If the assessment indicates that the prisoner has had prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will offer a follow-up meeting with a mental health or medical practitioner within fourteen calendar days of the intake screening. Interviews with prisoners who reported previous sexual victimization generally verify this finding. Interviews with medical and mental health staff confirm the practice of mental health services upon receipt of all agency referrals. Documentation review also supports facility adherence with the referral process.

(B) Per policy (PREA Manual), persons with a history of being sexually abusive must be referred for mental health services within 14 calendar days. Interviews with medical and mental health staff confirm the practice of mental health services upon receipt of all agency referrals. It was further noted that the nature of the referral is in accordance with the individualized needs of each prisoner. Documentation review also supports facility adherence with the referral process.

- (C) Policy (PREA Manual) requires that upon arrival, all NCF prisoners will be screened for sexual abuse risk factors. If the assessment indicates that the prisoner has had prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will offer a follow-up meeting with a mental health or medical practitioner within fourteen calendar days of the intake screening. Interviews with prisoners who reported previous sexual victimization generally verify this finding. Interviews with medical and mental health staff confirm the practice of mental health services upon receipt of all agency referrals. Documentation review also supports facility adherence with the referral process.
- (D) Per policy (PREA Manual, 03.03.140, 03.04.108) any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other 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 laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting. Documentation review also supports facility adherence with the referral process.
- (E) Per policy (PREA Manual, 03.03.140, 03.04.108) any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other 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 laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the prisoner is under the age of 18 years or considered a vulnerable adult. In speaking with medical and mental health staff, it was noted that staff do require informed consent prior to reporting incidents of prior sexual victimization that did not occur in an institutional setting for all persons except juveniles and individuals with developmental disabilities. Documentation review also supports facility adherence with the referral process.

#### Reasoning & Findings Statement:

Documentation specific to the OMNI Risk Assessment Tool for medical and mental health staff reflects the appropriate use of the screening tool to determine necessary housing and medical needs. Interviews with medical and mental health staff confirm the practice of mental health services upon receipt of all agency referrals. As noted by medical and mental health staff, the NCF is providing routine and regular medical screens and other health services in accordance to qualified medical assessments, as well as to policy. Lastly, per agency policy, all prisoners except juveniles and individuals with developmental disabilities, are required to provide informed consent prior to facility staff reporting information about prior sexual victimization that did not occur in an institutional setting. As such, the facility is meeting all provisions as established within this standard.

## Standard 115.82: Access to emergency medical and mental health services

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.82 (a)

- Do prisoner 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  No

#### 115.82 (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  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

#### 115.82 (c)

- Are prisoner 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  No

#### 115.82 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #03.04.108, Prisoner Health Information, 7-8-19
- MDOC #03.04.100, Health Services, 4-12-21
- MDOC #03.04.125, Medical Emergencies, 2-1-21
- MDOC PREA Authorization for Release of Information, 12/13
- MDOC Informed Consent Poster, English and Spanish
- MDOC Hepatitis Brochure
- MDOC HIV Brochure
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Compliance Manager
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of the Helen Newberry Joy Hospital & Healthcare Center
- Security Staff and/or Non-Security Staff Who Have Acted As First Responders
- Random Staff

#### Site Review Observations:

- Observed Medical Department
- Review of Medical/Mental Health Screening Forms

#### Standard Subsections:

(A) In accordance with policy (03.04.125), “employees shall provide appropriate and timely response to medical emergencies consistent with the employee’s training and the use of universal precautions.” In interviewing medical and mental health staff, said staff confirmed the ability to treat prisoners in accordance with their professional medical judgement. Documentation review also supports facility adherence with this policy.

(B) Policy (03.04.125) allows that prisoners shall be “sent to a local hospital or local emergency clinic if a QHP determines necessary services cannot be provided at the facility.” During interviews with first responders, as well as random security staff, all personnel recognized with immediacy the need to notify medical staff of any sexual abuse allegations. Documentation review supports facility adherence with this policy.

(C) Policy (PREA Manual) requires that prisoner victims of sexual abuse while incarcerated shall be offered timely and appropriate prophylactic information and treatment for sexually transmitted diseases. In speaking with medical staff, adherence to this policy was confirmed. In speaking with SANE/SAFE personnel, it was further noted that all medical precautions, to include

appropriate prophylactic information and treatment for sexually transmitted diseases, are given to victims of sexual abuse.

(D) Policy (PREA Manual, 03.03.140, 03.04.100) requires that all victims of sexual abuse shall have access to forensic medical examinations without financial cost where evidentiary or medically appropriate. The service shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. In speaking with medical staff, adherence to this policy was confirmed. Additionally, prisoners who had previously received medical treatment for allegations of sexual abuse generally confirmed that they were not charged a medical fee for said services. Documentation review supports facility adherence with this policy.

#### Reasoning & Findings Statement:

This standard is designed to provide prisoners access to emergency medical and mental health services. In this, facility staff are meeting all the provisions within this standard. Policy allows that upon receipt of a prisoner into the Medical Department, medical staff shall determine the prisoner's course of treatment; specifically, what is medically indicated based on evidence collection or physical trauma. Prisoner interviews acknowledge that prisoners are provided access to medical and mental health treatment. Lastly, documentation reflecting access to medical and mental health care, to include outside services, was reviewed. In reviewing the totality of the information provided, the NCF has met the minimums provisions of this standard.

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

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all prisoners who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  Yes  No

##### 115.83 (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  No

##### 115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

##### 115.83 (d)

- Are prisoner 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 prisoners 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  No  NA

#### 115.83 (e)

- 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 prisoners 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  No  NA

#### 115.83 (f)

- Are prisoner victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

#### 115.83 (g)

- 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  No

#### 115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known prisoner-on-prisoner 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  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

## Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC #03.04.108, Prisoner Health Information, 7-8-19
- MDOC #03.04.100, Health Services, 4-12-21
- MDOC #03.04.125, Medical Emergencies, 2-1-21
- MDOC PREA Authorization for Release of Information, 12/13
- MDOC Informed Consent Poster, English and Spanish
- MDOC Hepatitis Brochure
- MDOC HIV Brochure
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF PREA Forensic Examination Completed at Outside Hospital, 9-24-24

## Interviews:

- PREA Compliance Manager
- Medical Staff
- Mental Health Staff

## Site Review Observations:

- Observed Medical Department
- Review of Medical and Mental Health PREA Screening Forms

## Standard Subsections:

(A) Policy (PREA Manual, 03.03.140) requires that all allegations of sexual assault must be evaluated immediately by the facility health staff. In this, “facilities shall offer medical and mental health evaluations and treatment that is determined medically necessary to prisoners who have been victimized by sexual abuse” (03.04.100). In speaking with medical and mental health staff, adherence to this policy was confirmed. In speaking with correctional staff, there weren’t any instances where any (0) staff indicated that the medical or mental health departments had ever, or would ever, refuse to provide medical or mental health treatment to any prisoner who claimed to have been a victim of sexual abuse. In speaking with prisoners who were receiving mental health treatment services, most confirmed that upon making their allegations, or upon facility transfer, they were automatically placed on the mental health rosters of their assigned facility.

(B) In reviewing a collection of agency, medical, and mental health policies (PREA Manual, 03.03.140, 03.04.100, 03.04.125, 03.04.108), it is evident that the NCF offers continuing medical and mental health services to prisoners throughout their assignment to the NCF. As noted by Medical and Mental Health staff, said services are also available, via continuing care and referrals, upon prisoner transfers to other facilities or their release from custody.

- (C) Policy (PREA Manual, 03.03.140, 03.04.100, 03.04.125, 03.04.108) requires that all victims of sexual abuse shall 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. As noted by medical staff, if it's not medically necessary to refer a prisoner to an outside emergency hospital department, the prisoner is treated in the facility infirmary after evaluation by a primary care provider. In each instance, as confirmed by medical and mental health staff, related services are provided in accordance with the judgement of qualified health care providers.
- (D) Within the audit time frame, NCF has not had any (0) biological females incarcerated at the facility. Accordingly, pregnancy tests are not medically appropriate.
- (E) Within the audit time frame, NCF has not had any (0) biological females incarcerated at the facility. Accordingly, pregnancy services are not medically appropriate.
- (F) Policy (PREA Manual, 03.03.140, 03.04.100, 03.04.125, 03.04.108) requires that when medically appropriate, prisoners will be offered tests for sexually transmitted infections. In speaking with medical staff, it was noted that all prisoners are provided medical services as appropriate for the nature of their concerns. Documentation review confirms that medical services are provided specific to the nature of the allegations presented.
- (G) Policy (PREA Manual, 03.03.140, 03.04.100, 03.04.125, 03.04.108) notes that all victims of sexual abuse shall have access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. The service shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident. In speaking with medical staff, as well as the SAFE/SANE personnel of the local medical center, adherence to this policy was confirmed. Additionally, NCF prisoners who had previously received medical treatment for allegations of sexual abuse generally confirmed that they were not charged a medical fee for said services.
- (H) Policy (PREA Manual, 03.03.140, 03.04.100, 03.04.125, 03.04.108) requires that mental health services shall attempt to conduct an evaluation on all known abusers within sixty (60) calendar days of learning of such history and offer treatment when deemed appropriate." In speaking with mental health staff, it was noted that while agency policy allows for 60 days to evaluate abusers, to help ensure the safekeeping of all prisoners, any known abusers are generally evaluated at a much faster rate. NCF documentation reflects adherence to this criterion. Specifically, as noted by the NCF PCM, 100% of all known abusers entering the facility have been scheduled for an evaluation by mental health services within the required time frame.

#### Reasoning & Findings Statement:

This standard is designed to ensure ongoing medical and mental health care for sexual abuse victims and abusers. The NCF offers qualified and coordinated medical and mental health care regardless of a prisoner's ability to pay for said services. As appropriate, prisoners are provided the opportunity to attend follow-up treatments, for both medical and mental health services. Once established, agency policy requires that access to said treatment follows the prisoner throughout the NCF system and can be

coordinated with community care upon the prisoner's release from the NCF. The medical and mental health services provided are consistent with the community level of care. Additionally, this care is coordinated to ensure that prisoners receive every aspect of sexual abuse treatment, addressing both medical and mental health needs on a regular and timely basis, without regard to cost. Accordingly, the NCF Medical and Mental Health Departments have collectively met the provisions of this standard.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.86 (a)

- 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  No

#### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

#### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

#### 115.86 (d)

- 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  No
- 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  No
- 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  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- 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  No

### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC PREA Sexual Abuse Incident Review form: 2/19, 7/23
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23
- NCF PREA Sexual Abuse Incident Review, 11-1-24

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Incident Review Team Member

#### Site Review Observations:

- Reviewed Incident Review Team procedures.

#### Standard Subsections:

- (A) Policy (03.03.140) states that an incident review meeting shall be conducted within 30 days of the completed investigation of sexual abuse, unless the investigation determined the allegation was unfounded.” During the audit time frame, the NCF concluded six (6) sexual abuse allegations, excluding only unfounded and ongoing allegations. Accordingly, per the NCF PREA Compliance Manager, the NCF has appropriately engaged sexual abuse incident reviews on all six (6) concluded investigations. In speaking with the NCF PREA Compliance Manager, the NCF Warden, and the NCF Institutional Investigator, each person explained their role within the incident review process.
- (B) Policy (03.03.140) requires a sexual abuse incident review team to review all sexual abuse incidents, unless determined to be unfounded, within thirty (30) calendar days of the conclusion of investigation.” During the audit time frame, the NCF concluded six (6) sexual abuse investigations, excluding only unfounded and ongoing allegations. Accordingly, per the NCF PREA Compliance Manager, the NCF has appropriately engaged sexual abuse incident reviews. Documentation evidencing the practice sexual abuse incident reviews was reviewed to ensure timely compliance.
- (C) Policy (PREA Manual) requires that the sexual abuse incident review team “shall include upper-level custody and administrative staff, with input from relevant supervisory staff, investigators, and medical or mental health practitioners or others as appropriate.” Documentation was reviewed to ensure said meetings did contain the proper personnel mixture.
- (D) Policy (PREA manual) requires that the review team shall consider:
- a. Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
  - b. 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;
  - c. Whether the area in the facility where the incident allegedly occurred contains physical barriers in the area may enable abuse;
  - d. The adequacy of staffing levels in that area during different shifts;
  - e. Whether monitoring technology should be deployed or augmented to supplement supervision by staff.
  - f. Following consideration, prepare a report of its findings and any recommendations for improvement and submit such report to the Warden or Administrator.
- (E) Upon completion of the incident review report, the managing officer shall implement the recommendations outlined in the report for improvement or shall document its reasons for not doing so. In speaking with the NCF Warden, the responsibilities of the managing officer to implement sexual abuse incident team recommendations was explained.

#### Reasoning & Findings Statement:

During the audit time frame, the NCF concluded six (6) sexual abuse allegations, excluding only unfounded and ongoing allegations. As such, it was necessary to engage a sexual abuse incident review team upon the conclusion of each investigation, with the exception of unfounded investigations. A

review of documentation reflects the timely convergence of those designated staff members. While it was noted during the onsite portion of the audit that some PREA Sexual Abuse Incident Review forms being used were outdated and therefore not required to be signed by all members of the team, corrective action was taken to ensure updated forms are used in the future, thus ensuring signatures are acquired by all team members. As such, no further action is needed. In speaking with the NCF PREA Compliance Manager, the NCF Warden, and the NCF Institutional Investigator, each person explained their role within the incident review process. Hence, it is evident that the facility has procedures in place to engage incident reviews and that staff are knowledgeable in their obligations to the team. Accordingly, NCF has satisfied the requirements of this standard.

## Standard 115.87: Data collection

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.87 (a)

- 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  No

#### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

#### 115.87 (c)

- 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  No

#### 115.87 (d)

- 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  No

#### 115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its prisoners? (N/A if agency does not contract for the confinement of its prisoners.)  Yes  No  NA

#### 115.87 (f)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### **Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC PREA Sexual Abuse Incident Review form: 2/19, 7/23
- MDOC Survey of Sexual Victimization: 2020
- MDOC PREA Annual Report: 2022, 2023, 2024
- DOJ Survey of Sexual Victimization, 2023
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager

#### Site Review Observations:

- Extensive review of agency website/PREA section
- Reviewed 2022-2024 PREA Outcome Measures

#### Standard Subsections:

(A) Policy (PREA Manual) provides all staff within the NCF a standardized set of definitions specific to sexual abuse/sexual harassment allegations. Policy (PREA Manual) further mandates that all facilities shall report allegations of sexual abuse and sexual harassment into the appropriate MDOC computerized database. In speaking with the NCF PREA Compliance Manager, adherence to this provision was confirmed.

(B) Policy (PREA Manual) further requires that "The Department PREA Manager gathers data on each reported incident to aggregate an annual incident report." In speaking with the MDOC

PREA Coordinator, adherence to this provision was confirmed. Documentation review further supports this assertion.

- (C) Per the PREA Manual, “the report will include, at a minimum, the data necessary to complete the annual Department of Justice Survey on Sexual Violence.” Furthermore, as confirmed by the MDOC PREA Coordinator, the data includes all information necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Bureau of Justice Statistics.
- (D) Per the MDOC PREA Coordinator, the MDOC will maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.
- (E) Policy (PREA Manual) mandates that “the department PREA Manager also shall request data on each reported incident from every private facility contracted for the confinement of offenders when applicable.” The MDOC PREA Coordinator confirmed the agency’s adherence to this policy. Review of the agency’s website finds this information readily available:  
<https://www.michigan.gov/corrections/public-information/statistics-and-reports/prea>
- (F) Policy (PREA Manual) requires that the “Department shall provide all data to the U.S. Department of Justice from the previous calendar year upon request no later than June 30.” As confirmed by the PREA Coordinator, upon request, said data is provided to the DOJ no later than June 30<sup>th</sup> of each year.

#### Reasoning & Findings Statement:

This standard works to ensure that specific data relative to promoting sexual safety within a correctional institution is collected on a monthly basis. That data is then aggregated and made available for public review. The NCF has complied with the timely collection of said data and subsequently furnishes it to appropriate entities as required. Hence, the NCF has met all provisional requirements and is in compliance with this standard.

### Standard 115.88: Data review for corrective action

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.88 (a)

- 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  No
- 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  No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?  Yes  No

#### 115.88 (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  No

#### 115.88 (c)

- 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  No

#### 115.88 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

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#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- MDOC PREA Sexual Abuse Incident Review form: 2/19, 7/23
- MDOC Survey of Sexual Victimization: 2020
- MDOC PREA Annual Report: 2022, 2023, 2024
- MDOC Website Data
- DOJ Survey of Sexual Victimization, 2023

- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- Agency Head
- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager

#### Site Review Observations:

- Extensive review of agency website/PREA section
- Reviewed 2022-2024 PREA Outcome Measures

#### Standard Subsections:

- (A) Policy (PREA Manual) requires the PREA Coordinator to prepare and aggregate data related to sexual abuse and sexual harassment across all NCF facilities. Following which, the NCF then uses that data to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. Specifically, the NCF works to identify problem areas, take corrective action on an ongoing basis, and prepares an annual report of its findings from the data review and any corrective actions for each facility, as well as the agency as a whole. The PREA Coordinator confirmed adherence to this policy. As well, the MDOC PREA Annual Reports for years 2022, 2023, and 2024 does reflect the intelligent use of said data.
- (B) Policy (PREA Manual) requires that annual statistical reports will include a comparison of the current year's data and corrective actions with those from prior years to assess the Department's progress in addressing sexual abuse over time. The PREA Coordinator confirms adherence to this policy. As well, the MDOC PREA Annual Reports for years 2022, 2023, and 2024 does reflect a comparative analysis across years.
- (C) Policy (PREA Manual) requires that upon completion of each year's MDOC PREA Annual Reports, with the Director's approval, the report will be placed on the MDOC website. A review of the MDOC website indicates that upon approval from the agency director, the report is then made available to the public through the MDOC website. The PREA Coordinator confirms adherence to this policy. Furthermore, a review of the NCF website finds all agency PREA reports publicly available: <https://www.michigan.gov/corrections/public-information/statistics-and-reports/prea>
- (D) Policy (PREA Manual) requires that "prior to placing it (annual reports) on the website, information that would present a clear and present threat to the safety and security of any facility that would jeopardize any litigation or contains confidential information shall be redacted. If this information is redacted, an explanation of the nature of the material redacted will be included." In speaking with the PREA Coordinator, it was noted that should the agency need to redact specific information other than publicly identifying statistics, proper procedural restraints would be applied.

## Reasoning & Findings Statement:

This standard works to determine if agency, and by extension, facility base staff use aggregated data to promote the overall safety and security of the facility. In speaking with the MDOC PREA Coordinator, NCF PREA Compliance Manager, and the NCF Warden, the manner in which each person utilized the data to improve overall institutional safety, based on their role within the agency, was explained. Hence, the MDOC, and by extension the NCF, has demonstrated clear compliance with each of the provisions, and as such, has reached the goal of the standard.

## Standard 115.89: Data storage, publication, and destruction

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

#### 115.89 (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  No

#### 115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

#### 115.89 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
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- MDOC Survey of Sexual Victimization: 2020
- MDOC PREA Annual Report: 2022, 2023, 2024
- MDOC Website Data
- DOJ Survey of Sexual Victimization, 2023
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager

Site Review Observations:

- Extensive review of agency website/PREA section

Standard Subsections:

- (A) Policy (PREA Manual) requires “the Department shall ensure that all sexual abuse and sexual harassment data collected is securely retained.” The PREA Coordinator confirms agency compliance with this directive.
- (B) Policy (PREA Manual) requires “the Department shall make all aggregated sexual abuse data as outlined in the data collection section of this manual (PREA Manual) readily available to the public at least annually through its website.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. This data is made readily available to the public through the MDOC website.
- (C) Policy (PREA Manual) requires that “before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.” The PREA Coordinator confirms agency compliance with this directive.
- (D) Policy (PREA Manual) requires “the Department shall maintain sexual abuse data collected... for at least 10 years after the date of the initial collection.” The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the

collection of all annual aggregated reports previously published pursuant to §115.87. This data is made readily available to the public through the NCF website.

#### Reasoning & Findings Statement:

This standard works to ensure both public availability and agency integrity in the presentation of aggregated sexual abuse data. In reviewing agency documents and speaking with staff, it is more than apparent that both the MDOC PREA Coordinator, as well as the administration of the NCF, operate with transparency in government. As such, the facility has clearly obtained each provision, and thus, satisfactorily achieve overall compliance.

## AUDITING AND CORRECTIVE ACTION

### Standard 115.401: Frequency and scope of audits

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.401 (a)

- 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  No

#### 115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*)  Yes  No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.)  Yes  No  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.)  Yes  No  NA

#### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  
 Yes  No

#### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

#### 115.401 (m)

- Was the auditor permitted to conduct private interviews with prisoners, residents, and detainees?  Yes  No

#### 115.401 (n)

- Were prisoners permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator
- NCF Facility Warden
- PREA Compliance Manager
- Random/Targeted Staff
- Random/Targeted Prisoners

#### Site Review Observations:

- Onsite inspection of the entire NCF
- Review of documentation available via the MDOC PREA website

Standard Subsections:

- (A) PREA Audits were completed at all MDOC correctional facilities to provide for at least one-third of each facility type operated by the Agency being audited during each audit year of the previous cycle.
- (B) This is Audit Year 1 of Cycle 5.
- (H) The auditor had full access to all areas of the facility.
- (I) All documents requested by the auditor were received in a timely manner.
- (M) The auditor was permitted to conduct private interviews with prisoners.
- (N) Prisoners were permitted to correspond with the auditor using privileged mail processes.

Reasoning & Findings Statement:

The NCF PREA Compliance Manager was prepared for this review. The auditor was provided the PAQ in advance of arriving to the facility. The auditor was given unrestricted access to the institution and provided with all reference materials requested. The auditor was provided with a convenient location from which to interview both employees and staff in a confidential manner. Agency staff ensured that the flow of interview traffic was never restricted and that the auditor was able to attend all requested prisoner functions throughout the facility as needed. The auditor did not experience any significant barriers, at any stage of the audit, that were under the control of either the agency or the NCF. Accordingly, NCF has met the provisions of this standard.

### Standard 115.403: Audit contents and findings

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.403 (f)**

- 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 that there has never been a Final Audit Report issued.)  Yes  No  NA

**Auditor Overall Compliance Determination**

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

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

**Does Not Meet Standard** (*Requires Corrective Action*)

### **Instructions for Overall Compliance Determination Narrative**

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

#### Documents:

- MDOC Prison Rape Elimination Act (PREA) Manual, 4-24-17
- MDOC #03.03.140, Sexual Abuse and Sexual Harassment of Prisoners - Prison Rape Elimination Act (PREA), 7-21-25
- NCF #03.03.140, Prison Rape Elimination Act (PREA) and Prohibited Sexual Conduct Involving Prisoners, 12-18-23

#### Interviews:

- PREA Coordinator

#### Site Review Observations:

- Review of documentation available via the NCF PREA website

#### Standard Subsections:

(F.) A review of the agency website reflects that the NCF has published all final audit reports for prior audits completed during the last three years preceding this audit. Additionally, the MDOC PREA Coordinator affirms that all Final PREA Audits have been published on the agency's website.

#### Reasoning & Findings Statement:

The function of this standard is to promote transparency in government by ensuring that all facility audits are available for public review, by way of, for example, the agency's website. In this case, the MDOC does have an agency website and has made all facility PREA reports conveniently accessible to the public.

# AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any prisoner or staff member, except where the names of administrative personnel are specifically requested in the report template.

## Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.<sup>1</sup> Auditors are not permitted to submit audit reports that have been scanned.<sup>2</sup> See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Valerie Wolfe Mahfood

October 27, 2025

**Auditor Signature**

**Date**

<sup>1</sup> See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110>.

<sup>2</sup> See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.