

PREA Facility Audit Report: Final

Name of Facility: Macomb Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/10/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Grace A Franks	Date of Signature: 05/10/2018

AUDITOR INFORMATION	
Auditor name:	Franks, Grace
Address:	
Email:	gfranks@pa.gov
Telephone number:	
Start Date of On-Site Audit:	03/12/2018
End Date of On-Site Audit:	03/13/2018

FACILITY INFORMATION	
Facility name:	Macomb Correctional Facility
Facility physical address:	34625 26 Mile Road, New Haven, Michigan - 48048
Facility Phone	
Facility mailing address:	
The facility is:	<input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input checked="" type="radio"/> Prison <input type="radio"/> Jail

Primary Contact			
Name:	Kristopher Steece	Title:	Inspector
Email Address:	steecek@michigan.gov	Telephone Number:	586-749-4900

Warden/Superintendent			
Name:		Title:	
Email Address:		Telephone Number:	

Facility PREA Compliance Manager			
Name:	Kristopher Steece	Email Address:	SteeceK@michigan.gov

Facility Health Service Administrator			
Name:		Title:	
Email Address:		Telephone Number:	

Facility Characteristics		
Designed facility capacity:		
Current population of facility:		
Age Range	Adults:	Youthful Residents:
Facility security level/inmate custody levels:		
Number of staff currently employed at the facility who may have contact with inmates:		

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

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

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

AUDIT FINDINGS

Narrative:

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

A Prison Rape Elimination Act audit of the Macomb Correctional Facility, located at 34625 26 Mile Road, New Haven, Michigan, was conducted from March 12, 2018 to March 13, 2018, pursuant to the audit consortium formed between the Maryland Department of Public Safety and Correctional Services, the Michigan Department of Corrections, the Pennsylvania Department of Corrections, and the Wisconsin Department of Corrections. The consortium conducts circular audits at facilities in other consortium states. The circular auditing schedule was developed by leadership in all of the consortium states to ensure that no audits would be considered reciprocal, and no audits will be conducted between contracted agencies. The purpose of the audit was to determine the facility's compliance with the Prison Rape Elimination Act (PREA) standards which became effective August 20, 2012.

I, Grace Franks lead certified Department of Justice Auditor (DOJ) was assisted during this audit by DOJ Certified Auditor Valarie Kusiak and Administrative Officer Brenda Atkin. Ms. Kusiak and Ms. Atkin assisted me with the site review and interviews for this audit.

The audit team would like to extend its appreciation and thanks to Warden Warren, Deputy Wardens Stephenson and Steward, and their staff for their professionalism demonstrated throughout the audit and their willingness to comply with all requests and recommendations made by the auditors during the site visit. The audit team would also like to recognize the MDOC PREA Manager Charles Carlson, PREA Analyst Wendy Hart, and the Macomb Correctional Facility PREA Coordinator Kristopher Steece for providing all pertinent and required documentation during the pre-onsite audit phase, on-site audit phase, and post on-site audit phase.

Pre-Onsite Audit Phase:

The notification of the PREA Audit was provided to the Macomb Correctional Facility on January 19, 2018. The notice included the post-office box in which inmates can write confidentially to the PREA Auditor. The P.O. Box is solely monitored by the PA Department of Corrections PREA Coordinator and mailings are sent to the appropriate auditor. The postings were hung in all housing units and the facility lobby. This auditor was notified of the postings by the facility's PREA Coordinator and agency PREA Analyst via email and photographs. Posting was further confirmed by the facility tour, receipt of correspondence from an inmate, and the request of an inmate to meet with the auditors while on-site.

I was provided a flash-drive that contained pre-audit documentation, various policies, and other relevant documents. Macomb Correctional Facility uploaded documentation into the Online Audit System (OAS) as well. The pre-audit questionnaire was completed and sent to the auditor via email as well as on the flash-drive, and in the OAS. Prior to the on-site audit this auditor communicated with PREA Analyst Hart and PREA Coordinator Steece via email and telephone. Prior to the Pre-Onsite Audit phase the following documentation was reviewed by this auditor, agency mission and website, internal and external audits and accreditations for the facility (fire safety, internal facility audit), daily population reports, the schematic

of the facility, list of staff by shift and role, list of inmates by housing units, agency PREA Manual, PREA policies, medical and mental health care policy, discipline policy, inmate handbook, PREA training for inmates, PREA training for staff, organizational charts for the agency and facility, staffing plan, documentation of annual reviews of the staffing plan, documentation of unannounced rounds, search policies, grievance policies, pat search training curricula, staff training logs, work order for interpreter services, PREA orientation and informational materials in both English and Spanish, hiring and promotion policies, background check policies, documentation of background records checks of current employees done annually, evidence collection manuals and policies, investigation policies, specialized PREA Investigator training curricula and logs, referrals to mental health and medical, documentation of specialized training for medical and mental health care staff, screening policies, risk screening instrument, segregated housing policies, retaliation monitoring logs, risk assessment logs, agreement with Michigan State Policy to conduct criminal investigations, memo notifying use of Turning Point as a victim advocacy center, images of posters displaying contact information for outside victim advocacy groups, reporting policies and educational signage, staff reporting policies, retaliation policies, first responder training, policies, and protocols, sexual abuse incident review documentation, data collection policies, examples of disciplinary actions against staff, contractors, volunteers, and inmates, samples of notifications to other facilities upon report of sexual abuse which occurred in another facility, and annual reports for Michigan Department of Corrections.

Onsite Audit Phase

The audit team arrived on site at approximately 0830 hours on March 12, 2018. An entrance meeting was held with key administrative staff. Introductions were made and logistics for the audit were discussed. Following the entrance meeting inmate rosters were reviewed by the audit team and a list of randomly selected inmates and randomly selected targeted inmates were provided to the facility staff so Ms. Atkin could begin inmate interviews. Inmates were selected randomly with an attempt to capture inmates from all housing units. Inmate rosters by housing unit were provided to the audit team. All inmates who were identified as being from a targeted group were highlighted. The auditor randomly selected at least two randomly selected inmates from each housing unit and made an effort to select an inmate belonging to a targeted group from each housing unit if possible. Forty-one inmate interviews were conducted, twenty-one were random, twenty were targeted. Of the targeted inmates two were disabled, one was limited English proficient, two were identified as having a cognitive disability, five identified as gay or bisexual, seven identified as transgender or intersex, four reported sexual abuse while incarcerated at Macomb Correctional Facility, and three reported sexual victimization during their risk screening. There were no inmates currently incarcerated at Macomb Correctional Facility who were in segregated housing for high risk of sexual victimization. Macomb Correctional Facility houses only adult males, therefore no youthful inmates were interviewed. While Ms. Atkin conducted inmate interviews, Auditors Franks and Kusiak toured the facility with PREA Coordinator Steece, PREA Compliance Manager Carlson, PREA Analyst Hart, Prison Counselor Jenkins, and Captain Herbert. Inmate interviews were conducted utilizing the PREA Resource Center's interview templates for random and targeted inmates.

The tour covered all areas of the facility that were operational that inmates had access to including all seven housing units, the school and programs building, the maintenance warehouse, health care and food services building, the yard areas, the administrative building and the mental health services modular. Auditors were permitted access to all areas of the facility. The Macomb Correctional Facility consists of four Level II housing units, two Level IV units, and one Level I building outside the security perimeter. Housing Units 1, 2, 3, 4, 5, and 7 are designed similarly. Housing units 1, 2, and 3 have a maximum capacity of 240 inmates, housing units 4 and 5 have a maximum capacity of 192 inmates,

housing unit six has a maximum capacity of 120 inmates, and housing unit seven has a maximum capacity of 176 inmates. At the time of the tour there were a total of 1384 inmates. The average daily population for the last twelve months was 1,379.

During the on-site audit tour informal interviews were conducted with inmates and staff in each area toured throughout the facility. These informal interviews supplemented the formal interviews conducted to determine compliance with the standards. During the audit tour random counselor files were reviewed to verify inmate PREA education and PREA risk screening was completed as per policy and standard.

During the tour the auditors observed the facility's camera monitoring system within the control center to verify that cameras were positioned in such a way to provide adequate coverage of the facility and afford privacy in bathroom/shower areas. Macomb Correctional Facility has a total of 276 cameras throughout the property constantly recording, with a thirty day retention period. The facility's video surveillance covers approximately 98% of the facility. The mechanical rooms and maintenance areas do not have direct camera access but the entrance into those areas is covered. There are several monitoring stations throughout the facility which allow staff to monitor specific cameras in their area.

Throughout the tour the auditors evaluated camera coverage, staff coverage, bathroom and shower areas, and inmate cells. It is evident by observations made during the on-site audit phase that effort has been made by the facility to ensure that inmates have the ability to shower, use the bathroom, and change clothing without being observed by the opposite gender. There were few blind spots noted throughout the facility, one in particular was a strip search area in the intake area. Discussion was had regarding this area and ways to monitor it better. Macomb Correctional Facility staff was open to the suggestions made and will consider possibly installing a camera in that particular area. Another area of concern noted was in the level 1 housing unit. The stairwell doors at the end of each wing were not secured, if they were opened an alarm went off, but there was no camera coverage in the stairwell. Immediately facility staff worked to correct this issue. The stairwell door was secured before the auditors left the facility on the first day of the tour.

Following the tour of the facility, the auditors met with the Training Sergeant to discuss training requirements for specialized staff and PREA training for all staff. The auditors were shown the Training Automated Database kept by the MDOC to monitor and track staff training. Training curriculums were discussed and methods of training, i.e. computer based vs. classroom. Staff, volunteer, and contractor training records were reviewed to ensure PREA training was conducted.

The auditors met with Human Resources staff to discuss hiring and promotion practices. Employee files were reviewed and documentation was provided to the auditors indicating that the required pre-employment questions are asked of each candidate. Three personnel files were reviewed, one was of a newly hired staff, one was of staff hired within the last year, and the other was of a staff member who had been employed with MDOC for over a year.

The auditors then began specialized staff interviews and random staff interviews before closing for the day at approximately 1730 hours. Staff were chosen randomly using the shift rosters. Staff were chosen from all three shifts. The auditors utilized the staff rosters to randomly select twelve staff. Staff were randomly selected to represent all three shifts, a variety of work posts, a variety of rank, and sex. Specialized staff were chosen randomly based on their role at the facility and shift. A total of thirty-two staff were formally interviewed, twelve were random staff, twenty were specialized staff. Specialized staff interviewed were as follows agency head designee, warden's designee, PREA Coordinator, PREA

Manager, two intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds, two medical staff, two mental health staff, HR staff member, SANE, one volunteer, one contracted employee, three investigative staff, two staff who conduct risk screening, one security staff who supervises inmates in segregated housing, a member of the incident review team, one designated staff member who monitors retaliation, two first responders (1 security, 1 non-security), and an intake staff member.

The second day of the on-site audit, the audit team arrived at the facility at 0500 hours and began random staff interviews to capture the third shift staff, random staff interviews and specialized staff interviews continued throughout the morning. This auditor met with the PREA Coordinator to review some documents including investigation files, additional counselor files, and see the Automated Investigation Management system (AIM) in which all investigations are logged. Investigation files for all types of sexual abuse and sexual harassment investigations were reviewed. There were 47 allegations of sexual abuse or sexual harassment in the last twelve months, 47 were forwarded for investigation, 13 were referred for criminal investigation, 7 were substantiated, 25 were unsubstantiated, 15 were unfounded and all 47 investigations have been completed. 12 allegations were made utilizing the PREA grievance process in the last twelve months, all 12 grievances reached a final decision within 90 days, no extensions were needed. 2 emergency grievances were filed with all receiving a response within 48 hours and a final decision within 5 days. The facility received 5 allegations from other facilities and forwarded 5 allegations received that an inmate was abused in another facility to that facility.

The following files were reviewed during the on-site phase of the audit: complete inmate roster by housing unit, complete staff roster by role and shift, list of contractors and volunteers, 12 investigation files, six counselor files, Specialized PREA Investigator training logs, Specialized PREA Medical and Mental Health training logs, Victim Advocate training logs, unannounced rounds logs, investigation logs, risk screening logs, inmate PREA orientation materials, daily population report for each day of the audit, 3 employee personnel files, referrals to medical and mental health due to PREA related incidents or risk assessment scores, list of all contracted medical staff, inmate educational materials, PREA zero-tolerance posters, posters notifying inmates, visitors, and staff of reporting methods, contact information for victim advocacy services, sample investigator reports, retaliation monitoring logs, and an updated agency annual report.

Following the review of files, it was brought to this auditor's attention that an inmate was requesting to meet with the auditors. At this time an interview was conducted with this inmate.

A pre-exit meeting was held with the PREA Manager, PREA Analyst, PREA Coordinator, and the audit team prior to the exit meeting. At this time the audit team reviewed and clarified any concerns with the PREA management staff. At 1430 a formal exit meeting was held with all facility management and staff who chose to attend.

Post Onsite Audit:

During the post-onsite audit phase of this audit the auditor was in constant communication with the PREA Coordinator and the PREA Analyst to provide additional documentation as needed. Additional documentation included the updated annual report, memos/directives needed for clarification, the Prisoner Guidebook, additional round reader reports, additional samples of referrals to mental health and medical from those reporting sexual abuse, and additional investigation files.

The audit findings are based upon a review of documentation provided by Macomb Correctional Facility

and on-site observations and interviews. This auditor finds that Macomb Correctional Facility meets all PREA standards and exceeds standard 115.17. Corrective action was needed in two areas and one area was completed prior to the end of the on-site audit phase and the other was completed while in the post-audit phase. Macomb Correctional Facility met all requirements of the standards set forth in the Prison Rape Elimination Act.

The determination of compliance is made by this auditor utilizing a triangulation methodology. The audit team reviewed documentation including policies, procedures, files, memos, reports, training curricula, and logs. Then the audit team conducted on-site interviews with both staff and inmates formally and informally throughout the facility tour. The audit team conducted a site review to make observations of the physical plant in regard to prevention and detection of sexual abuse and sexual harassment. After review of documentation, interviews, and observations made during the site review, a determination can be made based on the evidence collected that the facility is substantially compliant with all of the PREA Standards.

Corrective Action:

Standard 115.13 a. requires that the agency's staffing plan take into consideration all components of the facility's physical plant in calculating adequate staffing levels and determining the need for video monitoring. The documented staffing plan is in compliance with the standard, however during the on-site tour a vulnerable area was identified. The Level 1 housing unit stairwell doors were not secured and the stairwell did not have any cameras. An alarm did go off when the doors were pushed on but the alarm was faint. The facility maintenance staff was instructed by facility management to secure the stairwell doors in the housing unit and this task was accomplished by the end of the first day of the on-site audit.

Standard 115.41 i. requires that appropriate controls are in place on the dissemination within the facility of responses to risk screenings in order to ensure that sensitive information is not exploited. While Macomb Correctional Facility staff maintain the risk screening tool electronically, with only specific staff having access, counselor files reviewed did have risk screening tools included in them from other Michigan Department of Corrections Facilities. The Michigan Department of Corrections PREA Manager and PREA Analyst were notified of this issue and a recommendation as made to send out a memo to remove all risk screening tools from inmate files. In the Post-Audit Phase, Macomb Correctional Facility PREA Coordinator sent out a directive via email to all of the assessment staff which instructs them to remove and appropriately destroy all previously filed risk assessment forms upon initial assessment during facility intake and/or during annual assessment. Corrective action is in place, therefore at the time of final report this auditor finds Macomb Correctional Facility compliant with this standard.

Exceeds Standard:

Standard 115.17 requires that the agency conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. Upon review of the PREA Coordinators background check log this auditor determined that Macomb Correctional Facility exceeds this standard by conducting criminal background records checks annually for all staff and contractors, which exceeds the standards requirement for every five years. This practice shows a commitment to the sexual safety of those under the care, custody, and control of the Macomb Correctional Facility.

AUDIT FINDINGS

Facility Characteristics:

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

The Macomb Correctional Facility (MCF) is an adult male facility with a maximum capacity of 1,416 inmates. The average daily population for the last twelve months was 1,379. On the first day of the on-site phase of the audit the inmate population was 1,384. 1,458 inmates were admitted to MCF in the last twelve months. The average length of stay at the MCF is one year, four months, and twenty-one days. There are three hundred and eleven staff employed by the facility who may have contact with inmates. MCF houses Level I, II, and IV inmates.

The facility opened in 1993 and was built on an 100 acre site which contains fifteen buildings totaling approximately 332,957 square feet. The inside perimeter of the prison contains two custody Level IV housing units, four custody Level II housing units, a food service building, one education and recreation building, and one modular office building used for the Residential Treatment Program. The outside perimeter includes one custody Level I housing unit, the administration building, maintenance, warehouse and storage buildings.

MCF housing units 1, 2, 3, 4, 5, and 6 consist of two levels and a total of four wings with two inmates per cell. Housing unit 7 has one wing with 30 single inmate cells and three wings with two inmates per cell. Housing unit seven is a mental health housing unit. There are 22 segregation cells in Building 200, these are single inmate cells.

The perimeter of the facility consists of a double, twelve foot galvanized chain link fence, topped with multiple rows of coiled stainless steel razor ribbon wire and alarmed with an electronic detection system. Two gun towers are present for high level observation. The minimum security perimeter is surrounded by one twelve foot chain link fence topped with multiple coiled stainless-steel razor wire and an electronic detection system. Surrounding the entire facility is a twelve foot galvanized chain link fence topped with coiled stainless-steel razor ribbon wire and alarmed with an electronic detection system. The perimeter is also monitored with the use of closed circuit video cameras.

MRF is an In-Reach Prisoner Re-Entry Facility serving Macomb and Oakland counties. Programs provided at MCF include Adult Basic Education, General Education Development, GED, Special Education, Employment Readiness, vocational education programs, Thinking for a Change, Cognitive Restructuring, Substance Abuse Programming, work assignments, religious services, Inside Out, Chance for Life, Leader Dogs, Pathways to Success, and various other programs provided by community volunteers. Inmates are provided on-site routine medical and dental care. Any medical emergencies which need to be addressed at a hospital are sent to Henry Ford Hospital Macomb or McLaren Macomb ER.

There are a total of 311 staff who have contact with inmates. The command structure within the security ranks include correctional officers, Sergeants, Lieutenants, Captains, Inspectors, Deputy Warden, and Warden. There are 126 volunteers and contracted employees, who may have contact with inmates,

currently authorized to enter the facility.

The layout of the housing units allow the officers to have view of all wings from their designated work post with rounds occurring once per hour and supplemental rounds being conducted by rovers or supervisory officers or management staff. As per the staffing plan each housing unit is staffed with an adequate number of officers per shift.

During the audit tour and through inmate interviews with both staff and inmates, all staff and inmates interviewed formally and informally gave this auditor the impression that they felt safe at the facility.



AUDIT FINDINGS

Summary of Audit Findings:

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

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

Number of standards exceeded:	1
Number of standards met:	44
Number of standards not met:	0

Number of Standards Exceeded: 1

115.17

Number of Standards Met: 44

115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 115.65, 115.66, 115.67, 115.68, 115.71, 115.72, 115.73, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.88, 115.89, 115.401, 115.403

Number of Standards Not Met: 0

Summary of Recommendations and Corrective Action: One specific recommendation was made and two specific corrective actions were made prior to completion of the final report. RECOMMENDATION: Increased surveillance of strip search area in the Intake area (possibly a camera or additional staffing to avoid the 1:1 staff to inmate ratio) CORRECTIVE ACTION COMPLETED 1) Memo to counselors to remove Risk Assessments from files upon annual review and intake, and 2) secure the stairwell doors in the level 1 housing unit (this was completed before auditors left the site on the day the recommendation was made).

Standards

Auditor Overall Determination Definitions

- Exceeds Standard
(Substantially exceeds requirement of standard)
- Meets Standard
(substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard
(requires corrective actions)

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.11 a. Michigan Department of Corrections Policy Directive 03.03.140 and the PREA Manual establishes the agency's zero tolerance standard for sexual abuse between or among prisoners, and a zero tolerance for staff sexual misconduct, staff sexual harassment, and staff overfamiliarity with prisoners. Policy Directive 03.03.140 outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors and notes sanctions for violation of the policy. The Prison Rape Elimination Act (PREA) Manual for the Michigan Department of Corrections (April 2017) outlines disciplinary sanctions and corrective action more in-depth. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.11 b. Michigan Department of Corrections employs an agency wide PREA Manager (fulfills the role as the Agency PREA Coordinator). This position is four layers removed from the agency Director with sufficient authority to implement agency efforts to comply with the PREA standards. The PREA Manager reports that he has sufficient time and authority to implement PREA standards throughout the Michigan Department of Corrections. The PREA Manager works solely as the agency's PREA Manager, with no other duties or tasks assigned. The PREA Manager has regional PREA Analysts who oversee implementation and compliance of PREA standards in various institutions. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.11 c. Macomb Correctional Facility has a designated PREA Compliance Manager. The PREA Compliance Manager is referred to by MDOC as the PREA Coordinator due to civil service rules, and reports directly to the Deputy Warden of Custody and Security. The PREA Coordinator for the Macomb Correctional Facility also has the role of Inspector. The PREA Coordinator reported that he has sufficient time to manage all PREA responsibilities and he is provided over-time as needed. Based on this auditor's observation during the on-site audit the PREA Coordinator has efficiently and effectively incorporated his duties as PREA Coordinator into his role as Inspector. This auditor would also note that the facility's PREA Coordinator is also a DOJ Certified PREA Auditor. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.12 a.</p> <p>Macomb Correctional Facility has not entered into or renewed a contract for the confinement of inmates on or after August 20, 2012, or since the last PREA Audit. As of the date of the audit, no contracts have been awarded or sought to house inmates from Macomb Correctional Facility. As per the Michigan Department of Corrections PREA Manual the Department shall include in all contracts to confine Michigan DOC prisoners, the obligation for the contractor to adopt and comply with the PREA standards. This auditor finds that Macomb Correctional Facility is compliant with this standard.</p>

115.13	Supervision and monitoring
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>115.13 a.</p> <p>115.13 requires each facility to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides adequate levels of staffing , and where applicable, video monitoring to protect inmates against abuse. The staffing plan provided to this auditor outlines the facility layout, programming, medical care information, and considerations as per PREA standard 115.13.</p> <p>During the onsite audit phase during the audit tour it was discovered that stairwell doors in the level 1 housing unit were not secured. The doors were at the end of each wing and the stairwell had no video monitoring coverage. This was an area of concern regarding prevention of sexual misconduct as the inmates and staff both had easy access to these doors. Immediately after discovering this area of concern the PREA Coordinator and facility administration began to take corrective action by securing the doors with locks. Throughout the remainder of the tour, facility staff were certain to check all housing unit stairwell doors to ensure they were all secured via locks to prevent blind spots or potential areas for victimization. Prior to the end of the first day of the on-site audit the stairwell doors in the level 1 housing unit were secured via locks. The facility maintenance staff on duty responded quickly to securing the area upon request of the audit team. Corrective action was completed on-site prior to the on-site audit phase completion and was both observed and photographs were taken and provided to the auditor as proof of correction.</p> <p>115.13 b.</p> <p>As per the facility's staffing plan the following considerations were made when developing the plan, adequate levels of staffing and video monitoring to protect inmates against sexual abuse, generally accepted detention and correctional practices, any judicial findings of inadequacy, any findings of inadequacy from federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the facility's physical plant, composition of the inmate population, number and placement of supervisory staff, programming, state or local laws, regulations, or standards, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors. This auditor finds that Macomb Correctional Facility is compliant with provision b.. of the standard.</p> <p>Macomb Correctional Facility analyzes the staffing plan annually in compliance with 115.13. Documentation provided indicates that all staffing plan considerations are addressed, video monitoring and technologies and resources available are reviewed annually. The documentation is signed off on by the Department's PREA Administrator, the facility PREA Compliance Manager, and the Warden.</p> <p>115.13 c.</p> <p>The Macomb Correctional Facility's staffing plan adequately addresses staffing levels in regards to inmate safety and security. If the agency is to deviate from the staffing plan a memo dated July 1, 2017 addresses how to accommodate any deviations from the staffing</p>	

plan. The memo cites the reasons for deviation to be staff vacancies, sick leave, emergency inclement weather, family medical leave act, and lack of staff to be mandated. The memo indicates which posts will be closed if a deviation from the staffing plan should occur. The closed posts were determined by shift because they are the least likely to negatively affect the safety and security of the facility. The memo also notes that in the past twelve months Macomb Correctional Facility has not had to deviate from the staffing plan. Since the date of that memo no deviations have occurred as per information gathered through interviews with the PREA Coordinator (compliance manager), Deputy Wardens, and Captain. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

During the on-site audit this auditor reviewed the facility's video monitoring technology. The facility recently upgraded their video monitoring technology in 2015/2016. In upgrading the video monitoring technology the facility took great efforts to identify possible blind spots and areas of concern. As per the Deputy Warden the facility video monitoring technology covers up to 98% of the facility.

115.13 d.

Macomb Correctional Facility Policy Directive 04-04-100 Custody, Security, and Safety outlines the requirement of unannounced rounds needing to be conducted by the Warden, Deputy Wardens, Shift Commanders, Inspectors, and Sergeants. The directive notes that staff alerting other staff of rounds is prohibited. The requirement of rounds includes all three shifts for all upper management. The Warden is required to conduct monthly rounds on all three shifts, the deputy warden is required to make weekly rounds, and monthly rounds on all three shifts, and the shift commander is required to do daily rounds, completing a round in each housing unit weekly.

Macomb Correctional Facility implemented a "Round Reader" system which electronically monitors rounds. The officer, supervisors, and management staff have a wand assigned to them and must conduct rounds as specified in Policy Directive 04.04.100. Each area has sensors placed in various locations in which staff must scan their wands. This system provides reports to upper management to ensure that rounds are conducted as set forth by policy. While this auditor was touring the facility upper level management staff and officers were observed making these rounds. This auditor was provided with several Round Reader system reports to verify compliance with rounds.

An interview was conducted with the Warden's designee and the PREA Coordinator in which the staffing plan was discussed. This auditor will note that the day of the on-site audit was the Warden's first day therefore the Warden's Designee was the Deputy Warden who was the Acting Warden throughout the audit preparation period. The Deputy Warden and the PREA Coordinator reported that the staffing plan is reviewed annually and PREA amongst other things (i.e. security, staffing) are taken into account at time of the review. The staffing plan is documented and maintained in the Warden's Office. Considerations are made regarding generally accepted detention and correctional practices; any judicial finding of inadequacy; any findings of inadequacy from federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plant; composition of the inmate population; number and placement of supervisory staff; institutional programs occurring on a particular shift; any applicable state or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse;

and any other relevant factors. The PREA Manager reports involvement in the staffing plan process for each facility within the Michigan Department of Corrections. The Deputy Warden stated that there is adequate staffing, no one-on-one assignments, programming is considered, and if only one officer is present with inmates they are augmented by other staff (i.e. counselors, nurses, etc.). Video surveillance is taken into account at the time of the staffing plan review. The video monitoring system was updated in 2016 adding the 360 view cameras. All in all 150 cameras were added throughout the system update. All cameras were placed based on surveillance needs and to reduce blind spots. The Deputy Warden reports that approximately 98% of the facility is covered by video surveillance. In considering the staffing plan as it relates to the inmate population the Deputy Warden noted that their mental health housing unit has a higher number of officer posts than other housing units due to the movement and needs of that population. The PREA Coordinator noted that the PREA Incident Review Committee reviews the prevalence of substantiated and unsubstantiated incidents of sexual abuse at the close of every investigation, findings from these reviews are taken into account when reviewing the staffing plan. The PREA Coordinator also noted that observations are made regarding blind spots continuously during frequent tours of the facility by higher level staff. Two years ago the round reader system was implemented at the Macomb Correctional Facility. Utilizing reports from this system management can assure that the staffing plan is being followed in regards to rounds. Each staff member required to do rounds is assigned a round reader wand and must press them into security buttons placed strategically throughout the facility, the wand downloads the time and location. The Deputy Warden emphasized that the facility has a full staffing commitment with the union, therefore they cannot deviate from the staffing plan unless in exigent circumstances. In the last twelve months the staffing plan has not been deviated from, but if it were to be, a report would be submitted.

Intermediate or higher level facility staff interviewed report conducting unannounced rounds regularly as per policy. The rounds are documented utilizing the round reader system. As per policy staff are not to alert other staff regarding the rounds. Intermediate or higher level security staff interviewed report that they typically try to prevent notification by not conducting rounds in a pattern and they listen on the radio for any notifications, if staff notify other staff they will be disciplined for violating policy.

This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard due to completion of corrective action.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Macomb Correctional Facility does not house youthful offenders. This was observed throughout the on-site tour of the facility and a review of the inmate rosters confirmed this. Macomb Correctional Facility is a male, adult prison.</p> <p>Agency policy 05.01.140, Prisoner Placement and Transfer, outlines the agency's approach to housing youthful inmates. Agency policy dictates that male youthful inmates are housed at the Thumb Correctional Facility (TCF) and female youthful inmates are housed at Women's Huron Valley Correctional Facility (WHV). If a youthful inmate must be placed at another facility for the purposes of medical or mental health care, the placement must be approved by an agency Deputy Director and accommodations for sight, sound and physical contact separation must be made.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.15 a. b. c.</p> <p>As per Policy Directive 04.01.110, Search and Arrest in Correctional Facilities cross-gender strip searches shall be performed only by employees of the same sex as the prisoner being searched. The directive states that no employees of the opposite gender should be present during the search unless a supervisor's presence is required and the supervisor is of the opposite sex and no supervisors of the same sex are available. As per the PREA Analyst a supervisor's presence is required when it is a non-routine strip search. Policy Directive 04.01.110 states that following all strip searches conducted a written report shall be submitted to the Warden indicating what employees were involved in the search and the reason for the search.</p> <p>Policy Directive 04.04.110 states that body cavity searches are to be conducted by medical staff. Medical staff do not need to be the same sex as the prisoner being searched.</p> <p>Upon review of documentation and interviews conducted during the on-site audit no cross-gender strip or cross-gender visual body cavity searches of inmates were conducted within the last twelve months. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>Policy Directive 04.01.110 states that following all body cavity searches a written report shall be submitted to the Warden with a copy being provided to the prisoner. There are no female inmates housed at the Macomb Correctional Facility as evidenced by a review of inmate rosters and visually observed during the on-site audit.</p> <p>115.15 d.</p> <p>Policy Directive 03.03.140 section UU. states that the Warden will ensure that the layout of the facility allows for prisoners to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their buttocks or genitalia except in exigent circumstances or when incidental due to routine cell checks. All instances of exigent circumstances in which cross-gender viewing occurs must be documented. Upon review of the video surveillance system all bathroom areas do not provide visibility of the genitalia. The only cells in which the video surveillance system views into are the camera cells and the area in front of the toilet is blacked out within the system so that genitalia is not observed by the opposite gender. There are a total of ten camera cells in the facility. Individuals residing in camera cells must change their clothing in the shower area. All bathroom and shower areas were observed during the tour of the facility and appropriate measures have been taken to prohibit cross-gender viewing. The facility utilizes shower curtains and steel plates which block the genital area and dividers in bathroom areas to allow for privacy.</p> <p>As per staff interviews and inmate interviews conducted during the on-site audit inmates are able to use the toilet, shower, and change their clothing without being viewed by the opposite sex. Twenty-one inmates were interviewed regarding this and all twenty-one responded that they were never naked in full view of staff of the opposite gender.</p>

Policy Directive 03.03.140 section O. and P. require that all staff of the opposite gender of the prisoners housing unit must knock and announce their presence on the housing unit and wait ten seconds before entering. Macomb Correctional Facility has signs displayed notifying staff of this policy as well. During the on-site audit these signs were observed prior to entering every housing unit. While touring the facility announcements were made prior to entering the housing units. Signs were posted at every strip search area prohibiting female staff from entering. During the on-site audit interviews were conducted with both staff and inmates who verified that female staff announce themselves prior to entering a housing unit. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.15 e.

Policy Directive 04.06.184 states that staff shall not physically examine a prisoner for the sole purpose of determining the prisoner's genital status. Macomb Correctional Facility has a specific policy (04.06.184) addressing the management of prisoners diagnosed with gender dysphoria. This policy states that if the gender is unknown it may be determined by conversation with the prisoner, review of medical records, or as part of a broader medical exam conducted by a medical practitioner. Inmates identified as transgender were interviewed as part of the on-site audit and confirmed that they were not strip-searched for the sole purpose of determining their gender and they are allowed to shower separately from other inmates. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.15 f.

All security staff are trained in conducting transgender pat searches. A review of training logs confirmed that 197 security staff completed the Custody Search Training. This auditor reviewed the training which includes how to conduct cross gender pat searches in a professional, respectful, and the least intrusive manner. Staff interviewed confirmed that training is provided on cross-gender and transgender pat-searches with the most recent training being conducted in 2018 . Transgender inmates interviewed confirm that these searches occur and are done properly. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.16 a. The PREA Manual states that PREA prisoner education must be provided in formats understandable to the entire inmate population. The manual states that prisoner assistants, interpreters, or readers may only be used in limited circumstances. Inmates interviewed who were identified as being disabled or limited English proficient stated that they were provided with information about sexual abuse and sexual harassment that they were able to understand.</p> <p>115.16 b. In the last twelve months on one occasion an interpreter service was utilized for an inmate who spoke Spanish. An interpreter work order and confirmation form was provided to this auditor pre-audit to show that services were provided for the PREA Assessment and education. This auditor contacted the interpreter service and was able to confirm that the Macomb Correctional Facility utilizes their services for interpreters. In the last year the interpreter recalls being utilized on two occasions, one being for a Spanish interpreter and another for an Arabic interpreter. Signs displayed throughout the facility are in both Spanish and English. Throughout the auditor tour of the facility the audit team confirmed that all PREA signage was in both Spanish and English. Throughout the facility tour and review of inmate rosters it was also noted that the facility's inmate population was comprised of predominately English speaking inmates with only one inmate being identified as non-English speaking. The one inmate identified spoke Spanish.</p> <p>An interview conducted with the Agency Head's Designee confirms that the agency takes significant steps to ensure that materials are provided in various formats to include captioning of the PREA inmate video in multiple languages, including Arabic and Spanish.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with this standard.</p> <p>115.16 c. Staff indicated during interviews conducted on-site that inmate interpreters, readers, or other types of inmate assistants are not used to assist inmates with disabilities or who are limited English proficient when making an allegation of sexual abuse or harassment. No allegations were made in the last twelve months in which an interpreter service was needed.</p>

115.17	Hiring and promotion decisions
	<p data-bbox="252 170 928 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 376 360">115.17 a.</p> <p data-bbox="252 371 1481 913">As per the PREA Manual criminal background checks are performed on all employees who may have contact with inmates. The manual also states that Michigan Department of Corrections (MDOC) shall not knowingly hire, promote, or enlist the services of any contractor who may have contact with inmates who previously has engaged in sexual abuse in a confinement facility, juvenile facility, prison, jail, lock-up, or other institution; has been convicted of engaging in, attempting to engage in, or conspiring to engage in sexual activity facilitated by force, threats of force or coercion, or if the victim did not consent or was unable to consent; and anyone who has been civilly or administratively adjudicated to have engaged in any of the aforementioned. MDOC also considers incidents of sexual harassment when determining if a candidate will be hired. All applicants who may have contact with inmates are asked about previous misconduct as part of the application process on NeoGov and all contractors are required to complete the questionnaire as part of their company's employment process.</p> <p data-bbox="252 969 376 1003">115.17 b.</p> <p data-bbox="252 1014 1458 1216">During the on-site audit an interview was conducted with the Human Resources staff. Staff interviewed report that prior incidents of sexual harassment are considered when hiring and promoting anyone, or to enlist the services of any contractor who may have contact with inmates. In order to be transferred or promoted within the MDOC an individual must have no disciplines on their record and no open investigations.</p> <p data-bbox="252 1272 408 1305">115.17 c. d.</p> <p data-bbox="252 1317 1465 1518">MDOC PREA Manual states that criminal history checks will be conducted for all employees, volunteers and contractors no less than every five years. Human Resources staff interviewed and the PREA Coordinator noted that all criminal background checks of new hires and volunteers are done at central office and the facility conducts background checks annually or every five years of current employees and contractors.</p> <p data-bbox="252 1574 376 1608">115.17 e.</p> <p data-bbox="252 1619 1471 1865">A database is maintained by the PREA Coordinator of all staff and contractors who have contact with inmates to monitor background checks. The Sergeants conduct the background checks based on the expiration date signified in the database. Upon review of this database it is noted that Macomb Correctional Facility exceeds the standard requirement to conduct a background check at least every five years. All staff and contractors who have contact with inmates have a background check run by the Sergeant annually.</p> <p data-bbox="252 1910 376 1944">115.17 f.</p> <p data-bbox="252 1955 1455 2078">MDOC utilizes NeoGov for application processing. Part of the application is a questionnaire asking all required questions of the standard. The directive also notes that LEIN background checks will be conducted every three years or more as directed by the facility.</p> <p data-bbox="252 2134 376 2168">115.17 g.</p>

Policy Directive 02.06.111 states that the Department shall not knowingly hire any new employee, promote any existing employee or enlist the services of any contractor who has contact with prisoners and has: 1. engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility or other institution (as defined in 42 U.S.C. 1997); 2. been convicted of engaging in, attempting to engage in or conspiracy to engage in sexual activity facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or 3. been civilly or administratively adjudicated to have engaged in the activity described in number 2 above. This directive also notes that LEIN background checks will be conducted every three years or more as directed by the facility. The review of the background check database indicates that background checks are conducted on all facility staff and contractors who have contact with inmates annually.

115.17 h.

Policy Directive 02.06.111 states that falsification or omissions of any information given by an applicant for employment during employment screening may result in removal from employment consideration and, if discovered after hire, may result in termination of employment. An interview conducted on-site with Human Resource staff and the PREA Coordinator found that upon request from another institution the facility provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee unless prohibited by law.

The audit team reviewed personnel files for an employee hired or promoted within the last twelve months and an employee hired over twelve months ago. The audit team also reviewed the employment questionnaire on the hiring website utilized by the state of Michigan to ensure that the pre-employment PREA screening questions were compliant with the act. Proper criminal background checks are conducted at the time of employment or promotion as verified by review of employee personnel files, interviews with Human Resource staff, and the PREA Coordinator.

This auditor finds that Macomb Correctional Facility exceeds requirements for this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.18 a. For all projects a form CAH-135 must be submitted and PREA Consideration is notated as a requirement. This auditor was provided with a memo dated January 2, 2018 stating that there were no substantial expansions or modification, including video monitoring systems in the last twelve months. The Deputy Warden confirmed this during his interview.</p> <p>115.18 b. A camera system upgrade was done in 2015/2016. The agency head's designee reported during interview that the agency approved expansion of camera coverage at all facilities and deployed electronic round readers at each facility to ensure adequate management tours of the facility that will be used in part, to prevent sexual abuse and sexual harassment. The camera system upgrade included a digital screening technology to digitally block viewing of toileting, showering, and strip search areas throughout the facility. The placement of cameras was strategically aimed to enhance sexual safety within the facility, while still affording privacy to dwelling, showering, and toileting facilities within the housing units. The Warden's designee also emphasized during his interview how great of an investigatory tool the camera system is. The strategic deployment of video monitoring technology and round reading technology demonstrates the agency and facility dedication to compliance with standard 115.18.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.21 a. Operating Procedure 03.03.140 indicates that investigations of prohibited sexual conduct will be completed by staff who have been trained as specialized investigators. Michigan Department of Corrections Crime Scene Management and Preservation Manual was reviewed by this auditor. The manual educates on scientific evidence, protecting evidence, crime scene management, outdoor crime scenes, and responsibilities of first responders. A crime scene preservation checklist is included in this manual which lists step by step instructions to managing and maintaining a crime scene. Staff interviewed report that they understand the protocol for obtaining usable physical evidence in the case of an alleged sexual abuse. If they are to be the first ones notified of such abuse they are responsible for separating the alleged victim from the perpetrator and then securing the crime scene. Macomb Correctional Facility utilizes evidence collection duffle bags which the inspector maintains in a secure area. The bags contain tools and materials to assist in the collection of evidence when responding to a crime scene. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.21 b. The Macomb Correctional Facility does not house youthful offenders. The Crime Scene Management and Preservation Manual used by the Michigan Department of Corrections is based off of US Army Investigation protocols and Michigan State Police guidance. This protocol is an alternative source to the Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents. The protocol is in line with the Michigan State Police criminal investigation procedures for sexual assaults which meets the all criteria as an appropriate protocol. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.21 c. Macomb Correctional Facility does not offer forensic medical examinations on-site. All prisoners needing exams are sent to Henry Ford Macomb Hospital or McLaren Macomb Hospital. In the last twelve months four prisoners have received SAFE exams at an off-site hospital. Interviews conducted with the SAFE/SANE nurses via telephone from the listed hospitals report that a SANE/SAFE is always on duty to conduct examinations. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.22 d. Macomb Correctional Facility utilizes Turning Point for all victim advocate services. In the event that a victim advocate is not available all medical and mental health staff at Macomb Correctional Facility have completed training and are approved sexual abuse victim advocates. Inmates who reported sexual abuse were interviewed regarding access to victim services. Inmates reported that they had access to victim advocacy services and were allowed to contact someone any time. The PREA Coordinator was also interviewed regarding victim services and reported that an advocate is always available whether from Turning Point or from the facility. While touring the facility several staff were asked what they would do if an inmate</p>

were to report sexual abuse to them and part of the response from all staff was to contact Turning Point and all were able to indicate to this auditor where the phone number was located. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.21 e.

The PREA Manual for the Michigan Department of Corrections outlines the role of the victim advocate. The victim advocate may be from an outside advocacy organization or a MDOC employee who is trained as a victim advocate. It is preferred that the advocate be from an outside advocacy organization, however if an advocate is not available trained MDOC staff will be available. The advocate, at the request of the victim, is to accompany and support the victim through the forensic medical examination process and investigatory interviews. The advocate is to provide emotional support, crisis intervention, information, and referrals. Documentation was provided to the auditor that shows that for all four SANE exams performed within the last twelve months a victim advocate was offered and provided. On one occasion the inmate declined the victim advocate at the facility but when they arrived at the hospital an advocate was requested and provided. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.21 f.

A letter from Michigan State Police dated September 30, 2015 states that the Michigan State Police will follow all applicable standards involving victim services and investigations as per the PREA Standards. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.21 h.

All staff who are trained as victim advocates have received specialized computer based training. All community providers such as SANE/SAFE and victim advocates are educated and trained as per their perspective medical facility's or agency/organization requirements. This auditor finds that Macomb Correctional Facility is compliant with provision h. of the standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.22 a. Policy Directive 01.01.140 Internal Affairs outlines the investigatory process for all allegations of employee misconduct including PREA related allegations.</p> <p>The PREA Manual indicates that all sexual abuse and sexual harassment investigations will be entered into the computerized investigation database and handled appropriately. The manual states that a thorough investigation shall be completed regardless of whether the alleged abuser departs from Department employment, the victim departs from the facility or the department. An interview conducted with agency head designee confirmed that every allegation is taken seriously and investigated. The agency head designee reports that staff trained as Specialized PREA Investigators begin the investigation. If the allegation is criminal in nature the Michigan State Police are notified. After all investigations are completed there is a review committee which reviews the incident to determine if any changes regarding prevention efforts need to be made. The audit team reviewed twelve closed investigation files and confirm that an Incident Review was conducted at the close of the investigation. Macomb Correctional Facility has 24 trained Specialized PREA Investigators. Specialized training was confirmed by reviewing training logs, the training curriculum, and formal interviews with investigators. These investigators submit their investigations to the facility PREA Coordinator who then submits them to the agency PREA Manager who reviews them.</p> <p>115.22 b. c. As per the PREA Manual and policy directive 03.03.140 all criminal investigations will be referred to the Michigan State Police. Interviews conducted with specialized PREA Investigators confirm that all allegations which may be criminal are referred to Michigan State Police. There are a total of 24 trained Specialized PREA Investigators employed by Macomb Correctional Facility. All Inspectors, Sergeants, Lieutenants, and Captains are trained PREA Investigators; therefore an investigator is available to begin investigations immediately 24/7.</p> <p>In the past twelve months there were 47 allegations of sexual abuse and sexual harassment that were received by Macomb Correctional Facility. 47 of those allegations resulted in an administrative investigation, 13 were referred for criminal investigation. This auditor finds that Macomb Correctional Facility is compliant with all provisions of the standard.</p>

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.31 a. The Michigan Department of Corrections PREA Manual states that all staff who may have contact with inmates shall receive PREA training which will include the Department's zero tolerance policy for sexual abuse and sexual harassment of prisoners; staff responsibilities related to prevention, detection, reporting, and response; prisoner's right to be free from sexual abuse and sexual harassment; the right of prisoners and staff to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; common reactions of sexual harassment and sexual abuse victims; how to detect and respond to signs of threatened or actual sexual abuse; how to avoid inappropriate relationships with prisoners; how to communicate effectively and professionally with prisoners including lesbian, gay, bisexual, transgender, intersex or gender non-conforming prisoners; and how to comply with mandatory reporting laws related to sexual abuse. The training curricula was reviewed by the auditors. The training is computer based and consists of two modules. The first module gives an introduction and overview of PREA, definitions, the Zero Tolerance policy, right of inmates to be free from sexual abuse and sexual harassment, retaliation prohibition, the dynamics of sexual abuse and sexual harassment in confinement, and the common reactions of sexual abuse and sexual harassment victims. The second module provides training on how to detect and respond to signs of sexual abuse and sexual harassment, reporting, inappropriate relationships, communicating with victims of sexual abuse and sexual harassment, and cross-gender viewing and searches. Randomly selected staff were interviewed as part of the on-site audit and all twelve confirmed that they have received training on PREA which includes all of the aforementioned topics. All twelve randomly interviewed staff also report receiving a refresher PREA training within the last year. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.31 b. PREA Training is provided specific to the facility annually. Macomb Correctional Facility only houses male offenders, therefore training is tailored to that population. If the employee is reassigned to another Michigan Department of Corrections facility which houses females, as per the MDOC PREA Manual, that employee would receive training tailored to the female population.</p> <p>115.31 c. In review of training records and discussion with both the PREA Coordinator and the Training Sergeant all employees who may have contact with inmates have received PREA training. This auditor reviewed logs indicating that 329 staff have completed the PREA training and 11 new staff completed the training as part of their new employee training. PREA refresher training is provided annually. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.31 d. PREA Training is computer based and record is kept electronically in a TAD system. The</p>

computer based training has a quiz which must be completed to indicate that employees understand the information provided. Training sheets can also be submitted which include the employee signature and indicate that the training was completed and the employee understands the information. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.32 a. As per policy 03.02.105 Volunteer Services and Programs, before providing volunteer services, each approved volunteer shall be provided information and receive an orientation by the Volunteer Program Coordinator. As part of the orientation 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. An interview was conducted with a volunteer and a contractor, who reported that they did receive this training. The PREA Coordinator reviewed the process of volunteer and contractor approval with this auditor, provided samples of volunteer training sheets, and a copy of the training curriculum which includes a module titled "Prisoner Contact - Sexual Abuse, Sexual Harassment, Overfamiliarity and Unauthorized Contact." The training module was reviewed by this auditor. Training consists of educating on the agency's zero tolerance policy, inappropriate relationships with inmates, sexual abuse, sexual harassment, and reporting requirements.</p> <p>115.32 b. Michigan Department of Corrections PREA Manual states that volunteers and contractors who may have contact with prisoners must be trained regarding their responsibilities and obligations under the Department's policies and procedures. The level and type of training provided is based on the level of contact with prisoners they have and the services they provide. Interviews with a volunteer and a contractor indicate that appropriate training was provided which addressed reporting methods and requirements, detection, response, and prevention of sexual abuse and harassment of prisoners.</p> <p>115.32 c. Contractors and volunteers submit training sheets indicating that they have received and understand the training provided regarding PREA policies. The volunteer orientation requires that the volunteer or contractor sign-off that they understand the policies and procedures in which they were provided training for which includes the sexual abuse and sexual harassment policies and procedures. This auditor reviewed a sample of four volunteer training verifications, and a sample contractor training log indicating that nine contractors received the training.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.33 a. Policies 03.03.140, 04.01.105, 04.01.140 and the PREA Manual, which were reviewed by the auditor address the standard's requirements to train inmates during the intake process regarding the agency's zero-tolerance policy, how to report sexual abuse and sexual harassment, as well as available services. Through interviews with random inmates, the PREA Coordinator, and intake staff it is reported that this education is completed through a video based presentation that is accompanied by a brochure that specifically covers the zero-tolerance policy, the definitions of sexual abuse, sexual harassment, retaliation, how to report sexual abuse, the process following a report, available services to victims and how to avoid sexual abuse. A review of these materials was conducted by this auditor and was found to be compliant with provision a. of the standard. This audit team noted that all inmates interviewed at the Macomb Correctional Facility were very well educated in PREA. In speaking with the intake staff the audit team was educated on the education process for intakes. Upon intake at the Macomb Correctional Facility the file is reviewed and if the PREA inmate education verification form is not on file the intake staff will require that the education is completed. As part of the intake, if the education has been completed the intake staff will provide facility specific PREA education on reporting, response, prevention, and detection.</p> <p>115.33 b. Intake staff and inmates interviewed report that within seven days of intake, comprehensive inmate education is provided at Macomb Correctional Facility. The training provided addresses the inmate's right to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting such incidents, and the agency policies and procedures for responding to such incidents. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.33 c. A review of random inmate files indicates that comprehensive inmate education is provided at the time of intake and facility specific education is provided upon transfer and intake at Macomb Correctional Facility. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard. Sixteen of twenty-one inmates interviewed report receiving information about the facility's rules against sexual abuse and harassment upon arrival at the facility. Nine of the inmates interviewed report receiving information immediately upon arrival, three within 72 hours, two within a week, 2 within one month and one reported receiving it more than one month following arrival at the facility. Four inmates did not respond as they could not recall.</p> <p>115.33 d. The agency publishes written educational materials, such as the PREA brochure, PREA posters and Prisoner Guidebook in both English and Spanish. The agency has a braille version of the PREA brochure available for visually impaired inmates. The PREA video, Taking Action, has been closed captioned for the deaf and hard of hearing population. Each facility within the agency is responsible for maintaining an interpretation service contract for</p>

communication purposes. The Macomb Correctional Facility provided an Interpreter Work Order and Confirmation to show proof of services for a LEP inmate. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.33 e.

The agency and facility maintain documentation of inmate education via form CAJ-1036. As part of the facility's intake and receptions procedures, each new reception's file is reviewed and it is verified that the inmate has documented receipt of training within the file. The auditor randomly selected inmate files from housing unit counselor offices during the audit tour to verify that agency PREA training records met timeliness requirements. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.33 f.

The agency publishes posters that contain record of the agency's zero-tolerance policy and methods to report allegations of sexual abuse and sexual harassment. During a tour of the Macomb Correctional Facility, these posters were visible throughout the housing units, common areas of the facility, and the lobby area. Inmates receive a tri-fold PREA brochure that is published in both English and Spanish during the intake process and these materials were observed to be available to inmates during the audit tour. Based on this auditor's observation, staff and inmate interviews, Macomb Correctional Facility meets the standard 115.33. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.34 a. The agency has a Basic Investigator Training manual that was reviewed by the auditor. This manual provides additional, specialized training for agency investigators to conduct all forms of administrative investigations, including PREA administrative investigations. This investigative course covers a PREA specific module that includes the dynamics of sexual abuse within confinement settings, interview techniques for victims of sexual abuse and also contains modules specific to the preservation of evidence, interview techniques and employee rights, such as Garrity and Miranda warnings. The evidentiary standard of preponderance of the evidence is noted within the training on administrative investigations. Training records were provided to confirm that fifty-two active staff at the Macomb Correctional Facility completed the agency's investigator training. In addition to the agency's Basic Investigator Training, training records confirm that eighteen staff completed the NIC specialized investigator's training. All Macomb Correctional Facility investigators can conduct administrative investigations, all criminal investigations are referred to the Michigan State Police. There are a total of twenty-five approved Specialized PREA Investigators at Macomb Correctional Facility.</p> <p>115.34 b. The agency's investigative course covers a PREA specific module that includes the dynamics of sexual abuse within confinement settings, interview techniques for victims of sexual abuse and also contains modules specific to the preservation of evidence, interview techniques and employee rights, such as Garrity and Miranda warnings. The evidentiary standard of preponderance of the evidence is noted within the training on administrative investigations. The training informs participants on the requirements and procedures for referring potentially criminal acts for criminal investigation/prosecution. In addition to the agency's Basic Investigator Training, eighteen staff have participated in the NIC specialized investigator's training to provide additional information on the required standard topics. A review of training materials and training records for facility investigators demonstrates compliance with this standard.</p> <p>115.34 c. The agency maintains documentation of investigator training in the employee's training file and in the Training Automated Data (TAD) system maintained and monitored by the Training Sergeant. This auditor reviewed this system while on-site.</p> <p>Investigative staff interviewed reported that they have received specific training on conducting sexual abuse investigations in confinement settings. All investigative staff interviewed noted that they took both the NIC Training and the Basic Investigator Training. Also cited by investigators was training on the Automated Investigation Management (AIM) system which assists in assuring all appropriate information and tasks are conducted throughout an investigation. While on-site the PREA Coordinator showed this auditor how the AIM system works. Investigative staff interviewed report that they were trained in the following techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual</p>

abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative or prosecution referral.

This auditor finds that Macomb Correctional Facility is compliant with all provisions of the standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p data-bbox="248 241 523 277">Auditor Discussion</p> <p data-bbox="248 324 376 360">115.35 a.</p> <p data-bbox="248 367 1476 958">Agency policies 02.05.100 and 02.05.101 establish procedures for ensuring staff, including contract staff, are adequately trained based on their positions within the agency. The agency has developed a training curricula specific to medical and mental health staff that was reviewed by the auditor. These materials expand upon the Basic Training Module to cover the four points required by the standards. Training materials cover the detection of sexual abuse and harassment, preservation of evidence specific to facility responsibility (forensic examinations are conducted at an outside medical provider and no evidence is collected by medical or mental health practitioners), how to respond to victims of sexual abuse and sexual harassment and facility reporting responsibilities for allegations of sexual abuse and sexual harassment. Macomb Correctional Facility also provides victim advocacy training to all of its medical and mental health staff. Medical and mental health practitioners for Macomb Correctional Facility receive training beyond the standard's minimal requirements. The facility provided documentation of medical and mental health practitioners having completed the training modules related to their specific disciplines that were reviewed by the auditor.</p> <p data-bbox="248 1010 1476 1384">Medical and mental health staff interviewed report receiving specialized training in sexual abuse and sexual harassment. The training provided covered the following topics, 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 sexual harassment; and how and to who to report allegations or suspicions of sexual abuse and sexual harassment. Medical and mental health staff interviewed report that training occurs annually and is computer based. All medical and mental health staff interviewed also note that they are trained in victim advocacy. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p data-bbox="248 1435 376 1471">115.35 b.</p> <p data-bbox="248 1478 1444 1599">Macomb Correctional Facility does not provide on-site forensic examinations. All inmates in need of forensic examinations are sent to the local hospital. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p data-bbox="248 1650 376 1686">115.35 c.</p> <p data-bbox="248 1693 1476 1859">The facility provided documentation of medical and mental health practitioners' completion of the specialized training modules that was reviewed by the auditor. These training records are kept in the computerized training records system (TAD) for employees. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p data-bbox="248 1910 360 1946">115.5 d.</p> <p data-bbox="248 1953 1436 2157">The MDOC's training curricula specific to medical and mental health staff covers all areas required by the standards. The training is an expansion of the basic PREA training incorporating the specialized training topics for medical and mental health care staff. Staff must complete the basic PREA training prior to accessing the specialized training modules. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the</p>

standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.41 a. As per the PREA Manual, PREA Risk Assessment Manual, and policy directive 03.03.140 a PREA Risk Assessment shall be completed within 72 hours of the inmate's arrival at a correctional facility, this includes transfers. Interviews conducted with staff who are responsible for risk screening and a random sample of inmates confirm that inmates are given a risk assessment upon intake at the Macomb Correctional Facility. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.41 b. Policy dictates that risk assessments are to be conducted within 72 hours of the inmates arrival at the facility. Staff interviewed report that assessments are done within 72 hours. Inmates interviewed report that it is done as early as immediately upon arrival up to a few days after arrival. After speaking with staff, inmates, and reviewing records provided this auditor concludes that assessments are completed within 72 hours of arrival at the facility. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.41 c. The Macomb Correctional Facility utilizes a PREA Risk Assessment Worksheet that was reviewed by this auditor and determined to meet objective criteria as required by the standard. The assessment is an objective set of instruments that measures both an inmate's risk of victimization and risk for predatory behavior. The tool generates a numerical score based on weighted factors to determine an inmate's classification as either an Aggressor, Potential Aggressor, No Score, Potential Victim or Victim. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.41 d. The intake screening tool provided to this auditor for review considers the following criteria to assess inmates for risk of victimization, mental, physical, or developmental disability; age; physical build; has the inmate been incarcerated previously; is the inmate's criminal history exclusively nonviolent; any prior convictions for sex offenses; perception of being gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; previous sexual victimization; inmate's own perception of vulnerability; and if the inmate is detained solely for civil immigration purposes.</p> <p>Interviews were conducted with staff responsible for risk screening. Staff reported that the initial risk assessment considers all of the aforementioned criteria and is used for proper housing and insight into any prior victimization. Staff reports that the risk assessment is formatted as a yes/no format but allows for room for additional information or data. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.</p> <p>115.41 e. In review of the risk assessment tool utilized by Macomb Correctional Facility it is evident that</p>

the following is considered when assessing inmates for risk of being sexually abusive: prior acts of sexual abuse; prior convictions for violent offenses; and history of prior institutional violence or sexual abuse. Staff confirmed that these considerations are made as part of the assessment. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.41 f.

The PREA Manual and the PREA Risk Assessment Manual, which were reviewed by the auditor, clearly specify applicable time frames for assessment completion. The facility's reassessment process consists of three questions, two of which are certification by the assessor that the original victim and aggressor instruments are accurate. During the tour, inmate files were randomly sampled on the housing units to ensure that reviews of risk screening were conducted within 30-days. Staff interviewed report that risk screening occurs within 30 days after arrival or if something occurs prior to. The 30 day assessment includes a review of the intake assessment, the inmate's file, and an actual face-to-face assessment. Inmates interviewed report being reassessed a few weeks following their intake at the facility. The counselor showed the auditors a log indicating the intake date of the inmate, the date the initial assessment is due, and the date the 30 day review must be completed by. The audit team sampled the log entries to ensure that the dates were consistent with the required time frames. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.41 g.

The PREA Manual states that PREA Risk Assessments will be done within 72 hours and 30 days of the prisoner's arrival at a correctional facility, if it has been twelve months since the last review, and whenever warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may increase the prisoner's risk of being sexually abused by other prisoners or being sexually abusive toward other prisoners. Staff responsible for conducting assessments confirmed through interviews that the practice is as stated in the policy. During the tour of the facility an informal interview was conducted with a counselor who showed the auditors the risk assessment system on the computer. The counselor was able to show the auditors a case in which the inmate was reassessed following an incident of sexual abuse. The counselor noted that following the reassessment the inmate's PREA designation changed from "no score" to "potential victim." This auditor finds that Macomb Correctional Facility is compliant with provision g. of the standard.

115.41 h.

The PREA Manual, which was reviewed by this auditor, specifically states "Prisoners may not be disciplined for refusing to answer or not disclosing complete information in response to questions relating to mental, physical, or developmental disabilities, whether they are, or are perceived to be, gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous victimization, or their own perception of vulnerability." The PREA Manager, PREA Coordinator and staff responsible for conducting assessments confirmed during interviews that the assessment is voluntary and that there are no disciplinary consequences for failing to participate. This auditor finds that Macomb Correctional Facility is compliant with provision h. of the standard.

115.41 i.

The PREA Manual, which was reviewed by this auditor, confirms that information obtained during the risk assessment process shall be treated as confidential information and only shared with designated staff in accordance with Department policy. Risk assessment information shall not be shared with prisoners. During the audit tour and through interviews with the PREA Manager and PREA Coordinator, only those staff with a role in the risk screening process within the facility have access to the electronic screening system. Counselors adamantly stated that risk assessments were not to be placed in the prisoner file but stored electronically. This auditor reviewed several case files and found that Risk Assessments from other facilities were being kept in the files, however none were found to be from Macomb Correctional Facility.

This auditor's corrective action recommendation is to send out a statewide memo from Central Office directing that all risk assessments be removed from the prisoner files upon annual review. During the post on-site audit phase of the audit the facility's PREA Coordinator sent out a directive via email to all staff who conduct risk assessments, directing them to remove all risk assessments from the inmate file upon file review at intake or during annual file review. This directive has set corrective action in place which will be completed within a year. This auditor finds that Macomb Correctional Facility is compliant with provision i. of the standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.42 a.</p> <p>The auditor reviewed the PREA Manual and policy 05.01.140 and found that the agency policies are compliant and mirror the language set forth in the standard. The agency uses a computerized assessment process to arrive at an inmate classification for risk. The results generated from the assessment preclude housing potential victims with potential abusers within the computerized bed assignment program. During the on-site tour of the facility this auditor was shown how the system does not allow bed changes which would put a potential victim with a potential abuser. The facility provided a copy of their count sheets that identifies housing assignments along with assessed risk which the auditor believed was a great tool to demonstrate use of the screening information for housing decisions. The agency also issued an agency-wide memorandum to prohibit the pairing of identified Aggressors and Potential Aggressors with Victims or Potential Victims in isolated work assignments or those work areas with any blind spots that could enable sexual abuse. Policy directive 03.03.140 and the PREA Manual states that a 72-hour intake screening process for all incoming inmates is in place and negates the opportunity for key aspects of vulnerability to go undetected. The demonstrated practice of the facility conducting these intake assessments provides evidence that key aspects of vulnerability or predatory behavior are considered for each inmate.</p> <p>The PREA Coordinator and staff responsible for risk screening stated that the risk screening tool is used to determine what type of housing and cell assignment the prisoner will be assigned to, and what programming and work assignments are most appropriate. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.42 b.</p> <p>Policy directive 05.01.140 Prisoner Placement and Transfer and the PREA Manual, which were reviewed by this auditor, establish agency policy regarding individualized safety determinations. Policy, staff interviews, and review of assessments demonstrate that the facility makes individualized determinations to ensure the safety of each inmate, consistent with the standard. In addition to the risk screening process and its use to determine proper housing assignments, there is a degree of flexibility to make individual accommodations. The facility and the agency have a practice in place to review those individuals whose risk screening scores are not consistent with staff observations. As per the PREA Risk Assessment Manual the staff member conducting the assessment may override the finding of the assessment if there are compelling reasons to support the override. All overrides must be documented and the rationale provided on the PREA Risk Assessment Worksheet and entered in the electronic system. If the staff does not have compelling information to override the score, a collaborative team effort will be made to determine the appropriate override and overall PREA designation. The team will consist of health care staff, mental health care staff, and inspector or custody supervisors, and a residential unit manager. The result of the collaborative review will be documented on the PREA Risk Assessment Team Review form and entered in the electronic system. An interview with the PREA Coordinator regarding this process found that Macomb Correctional Facility has not had any overrides due to staff observations in the last twelve months. The PREA Coordinator stated that if they were to of</p>

had any it would be discussed with the PREA Coordinator, housing staff, health care, and mental health to ensure proper placement that considers the overall sexual safety of the prisoner is met. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.

115.42 c.

The PREA Manual and policy directive 04.06.184 Gender Dysphoria, were reviewed by this auditor. Both contained language and provisions to satisfy the standard requirements that the agency make case by case determinations for transgender and intersex housing and programming assignments consistent with the standard. The facility provided pre-audit samples of the facility's health care services review of a transgender inmate's placement on form CHJ-339. The auditor notes this review appears to be from a medical/mental health perspective and considers the inmate's health and safety. The PREA Coordinator at the facility states that transgender inmates are reviewed twice per year or anytime it is learned the inmate has experienced any threats to safety. Through formal interviews with transgender inmates this auditor was informed that ongoing assessments of individualized needs takes place consistent with the standard. Policy directive 04.06.184 and the PREA Manual were reviewed by this auditor. Policy indicates that placement and programming assignments for transgender, intersex and Gender Dysphoric inmates will be reassessed twice yearly by facility medical or mental health staff. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.42 d.

Policy directive 04.06.184 and the PREA Manual were reviewed by this auditor. Policy indicates that placement and programming assignments for transgender, intersex and Gender Dysphoric inmates will be reassessed twice yearly by facility medical or mental health staff; the facility's pre-audit sample documentation included four examples where individuals were reviewed and provided with updated Gender Dysphoric management plans.

The PREA Manual and policy directive 04.06.184 were reviewed by this auditor. Both documents provide for a transgender or intersex inmate's own views to be considered in the placement process. Policies indicate that these decisions are made by the Gender Dysphoria Collaborative Review Committee, chaired by the agency's chief medical and psychiatric directors. The transgender inmates that were interviewed reported their views regarding their safety were considered. Interviews with the facility PREA Coordinator and staff who conduct risk screening reveal that transgender and intersex inmates' views with respect to their own safety is given serious consideration in placement and programming assignments. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.42 e.

Based upon the formal interviews with the transgender inmates, the facility PREA Coordinator, staff who conduct risk screening, and policy, it appears that the transgender inmate's view were considered when making determinations for housing and other programming determinations consistent with provision e. of the standard.

115.42 f.

Policy directive 04.06.184 and the PREA Manual, reviewed by this auditor, specify that transgender inmates are given the opportunity to shower separately. A review of pre-audit

documentation that the facility provided confirms that the facility permits transgender inmates to shower separately. Specifically, form CHJ-339 for the sample placement reviews both had the checkbox indicating that the inmate required “special provisions” for showering in “relative privacy”. Interviews with the facility PREA Coordinator, staff responsible for risk screening, and transgender inmates confirm that transgender inmates are provided with the opportunity to shower separately. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.42 g.

Policy directive 05.01.140 and the PREA Manual, reviewed by this auditor, addresses standard 115.42 (g); however, the PREA Manual provides a unique exception to place transgender or intersex inmates in a dedicated unit when it is in the interest of the safety and security of the prisoner. This provision of the policy is open for interpretation and is contrary to the PREA Resource Center FAQ's in that the reader is led to believe that the facility has the sole right, without taking the inmate's own views with respect to safety, to determine placement. An interview with the agency's PREA Manager clarified this point to indicate that the agency considers some of its facilities with open bay style housing to be an unsafe environment for individuals who identify as transgender or intersex; thus, placing them in facilities with a high level of security and medical care to meet their transitional needs. The PREA Manager stated in an interview that the agency does not have dedicated facilities or housing units that are specific to LGBT populations. There are facilities within the agency that are not conducive to the safety and privacy needs of transgender and intersex inmates, such as those with open bay or dormitory housing, that the agency attempts to avoid placing such inmates within to ensure safety and privacy.

An interview with the PREA Coordinator at the Macomb Correctional Facility confirmed the facility takes no steps to house LGBT inmates in dedicated units or facilities but houses them based on health and safety. Interviews with LGBTI inmates reveal that no LGBTI inmates have been placed in housing units specific to LGBTI inmates. The facility and the agency practice demonstrates compliance with provision g. of the standard.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.43 a.</p> <p>The agency PREA Manual and policy directive 04.05.120 were reviewed by this auditor in determining compliance with the standard. The PREA Manual contains language that mirrors the standard. The auditor observed onsite and through pre-audit documentation that the facility has a robust computerized assessment and bed management system in place to ensure that inmates at high risk of victimization are not housed with inmates at high risk of predatory behavior. Through pre-audit materials, the facility reports that one inmate was placed into involuntary segregation for risk of victimization for a period of no longer than 24 hours. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>The Warden's designee stated in an interview that segregation is not used to protect inmates at high risk of sexual victimization unless it is the only means of keeping an individual safe. In those circumstances, such placement is limited to a very short period (less than 24 hours), before the inmate can be reviewed for appropriate housing within the facility or transferred to another location that can afford safety. The auditor is satisfied that the facility refrains from placing inmates at high risk of victimization in segregated housing.</p> <p>115.43 b.</p> <p>Policy directive 04.05.120 and the PREA Manual, which were reviewed by this auditor, specify that inmates shall maintain access to programs, privileges, education, and work opportunities. In the event such things are restricted, the facility is required to document the nature of the restrictions according to standard language.</p> <p>During the audit, the staff of the segregation units at Macomb Correctional Facility explained that any inmate placed into temporary segregation for PREA purposes would be treated just as any other prisoner placed into temporary segregation. This response implies that limitations to opportunities noted within the standard are possible.</p> <p>The facility reports that one inmate has been placed into involuntary segregation for protection from victimization or following a report of sexual abuse. The inmate was held in involuntary segregation for ten days awaiting transfer to another facility. This was assessed and determined to be the safest option for the inmate. A memo was provided to this auditor detailing the use of involuntary segregation for this particular inmate noting limitation to programs, privileges, education, work opportunities, and reasons for the limitations. In an interview with the Warden's designee, he stated that involuntary segregation would be an option of last resort. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.43 c.</p> <p>Macomb Correctional Facility utilizes involuntary segregation as a last resort but only until an alternative means of separation from likely abusers can be arranged. The case reviewed was housed in involuntary segregation for ten days, this did not exceed thirty days. No other</p>

inmates were held in involuntary segregation for the last twelve months. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.43 d.

The one case of involuntary segregation due to risk of sexual victimization which occurred in the last twelve months was reviewed. A memo was produced which detailed the reasoning for the facility's concern for the inmate's safety and the reason no alternative means of separation could be arranged. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.43 e.

Provision e. of the standard could not be reviewed, as the only case in which an inmate was held in involuntary segregation due to risk of victimization was only housed in segregation for ten days. Policy directive 04.05.120 notes that temporary segregation of inmates cannot exceed seven business days unless the prisoner is awaiting transfer or a hearing officer has found reasonable cause for delay. The PREA Manual states that if the inmate remains in segregation a review must be conducted at thirty days. Interviews with segregation staff corroborate the policy by stating that inmates are typically not kept in segregation for more than thirty days. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.51	Inmate reporting
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>115.51 a.</p> <p>The Michigan Department of Corrections (MDOC) Prisoner Guide Book encourages inmates to report incidents of sexual abuse immediately to staff, leaving a message on the MDOC Sexual Abuse Hotline, or by contacting the Legislative Ombudsman's Office or the Michigan State Police. The Prisoner PREA Brochure and Sexual Abuse posters provide the same information. During the on-site tour of the facility this auditor observed that Sexual Abuse posters were visible in all housing units and areas frequented by inmates.</p> <p>The MDOC PREA Manual and policy directive 03.03.140 states that prisoners may report sexual abuse or sexual harassment, retaliation by other prisoners or staff for reporting sexual abuse or sexual harassment, and staff neglect or dereliction of duty that may have contributed to such incidents verbally, in writing, anonymously, or through third parties. Reports can be made to any staff member, the Sexual Abuse Hotline, grievance process, via third parties, or through informing the Michigan Legislative Corrections Ombudsman.</p> <p>Through random interviews of both inmates and staff it is apparent that Macomb Correctional Facility inmates and staff are knowledgeable regarding how inmates can report incidents of sexual abuse, sexual harassment, retaliation, and staff neglect or violation of responsibilities which contributed to an incident of sexual misconduct. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.51 b.</p> <p>As per the PREA Manual, policy directive 03.03.140, the Prisoner Guide Book, posters throughout the facility, and the Prisoner PREA Brochure inmates can contact the Legislative Corrections Ombudsman. Such reports can be made anonymously. This auditor was provided with a Memorandum of Understanding (MOU) between the two agencies which specifies that reports must be forwarded immediately.</p> <p>The PREA Coordinator discussed the reporting options for inmates during his interview and cited the Legislative Corrections Ombudsman as the non-agency related reporting option for inmates. Interviews with inmates indicate that they are not familiar with using the Legislative Corrections Ombudsman as a reporting method however the information is provided in the various information materials provided to all inmates and inmates do utilize this method of reporting. Examples of prisoner reports to the Legislative Corrections Ombudsman were provided to this auditor.</p> <p>Neither the facility nor the agency hold individuals for civil immigration purposes. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.51 c.</p> <p>Policy 03.03.140 and the PREA Manual, which were reviewed by this auditor, require staff to accept verbal, written, anonymous and third-party reports. Any verbal reports are required to be forwarded to a supervisor and documented as soon as possible. During the onsite portion</p>	

of the audit, facility investigations were reviewed and demonstrated that the facility accepts reports that were made verbally, in writing (via grievance or other note) and from third parties. Through informal interviews during the audit tour, this auditor determined that both staff and inmates were well aware of the need for staff to accept and immediately act upon verbal, written, anonymous and third-party reports.

Inmates are aware of their ability to make reports of sexual abuse or sexual harassment in person, in writing, or through a third party as evidenced by the random inmate interviews conducted on-site. Sample documentation of reports to the third party reporting method, the Legislative Ombudsman's Office, were reviewed to validate use of the reporting method. Staff are aware that inmates can make reports of sexual abuse or sexual harassment verbally, in writing, via third party, and anonymously as evidenced by the random staff interviews conducted on-site. Inmates are more familiar with the grievance system method of reporting and reporting to staff as indicated by the interviews. Staff are aware that inmates can make reports of sexual abuse or sexual harassment verbally, in writing, via third party, and anonymously as evidenced by the random staff interviews conducted on-site. Staff are most familiar with the hotline, third party, and reporting to staff as indicated by the interviews. Staff report that documentation is done immediately after receiving a report of sexual abuse or sexual harassment. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.51 d.

Policy 03.03.140, the PREA Manual and Module 2 of the PREA training educates staff on their reporting options. These materials were reviewed by the auditor. Staff may make a private report to a supervisor, via the hot-line and via the agency's website reporting form. The agency provides multiple methods for staff to make private reports of sexual abuse and sexual harassment of inmates. Interviews of random staff indicate that staff are aware of methods to privately report sexual abuse and sexual harassment of inmates. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.52 a. The Macomb Correctional Facility utilizes administrative procedures to address sexual abuse and is not exempt from this standard.</p> <p>115.52 b. This auditor reviewed the Prisoner Guidebook which is provided to all prisoners incarcerated within the Michigan Department of Corrections and the Prisoner/Parolee Grievances Policy Directive 03.02.130. Also reviewed to determine compliance with this standard was the PREA Manual and policy directive 03.03.140. The Prisoner Guidebook notifies the inmates of the ability to submit grievances and policy directive 03.02.130 outlines the grievance process. 03.03.130 states that grievances filed regarding conduct in violation of 03.03.140 shall be conducted in accordance with that policy to the extent inconsistent with the Prisoner/Parolee Grievance policy. The Michigan Department of Corrections has developed a dual grievance system to include PREA related grievances and all other grievances. PREA grievances are routed differently and submitted on a different grievance form than a typical grievance. The PREA Manual states that prisoners can file a PREA Grievance at any time regarding alleged sexual abuse and there are no time limits imposed. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.52 c. Policy directive 03.03.140 states that prisoners shall not be required to submit a PREA grievance to a staff member who is the subject of the complaint and no PREA grievance will be referred to a staff member who is the subject of the complaint. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.52 d. As per policy 03.03.140 a written response must be provided to the prisoner who submitted a Step 1 PREA grievance within 60 calendar days of receipt, if an extension is needed it is not to exceed 70 calendar days. If the prisoner appeals the Step 1 PREA grievance, the Step 2 PREA grievance response shall be issued within 90 days of the receipt of the Step 1 PREA grievance.</p> <p>Macomb Correctional Facility reports that there were no extensions granted on Step 1 grievance responses in the last twelve months. A PREA Grievance log is maintained within the facility to assure that all responses are provided in a timely manner as per policy 03.03.140.</p> <p>Inmates who reported sexual abuse were asked if they received a letter regarding any decisions made about their report of sexual abuse and when they received that report. Two of the four inmates interviewed reported receiving a written notification, the other two report that they did not receive any written notification. This auditor reviewed investigation files and the PREA grievance log. All investigations files reviewed and the PREA grievance log confirm that PREA grievances are responded to within a 90 day time period.</p>

As per policy all PREA grievances are required to receive a response in writing. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.52 e.

Policy 03.03.140 and the PREA Manual state that third parties shall be permitted to assist prisoners in filing PREA grievances related to sexual abuse. If a PREA grievance is filed by a third party on behalf of an inmate the alleged victim must sign the grievance authorizing the grievance to be filed on their behalf. If the victim refuses to sign the grievance it will be dismissed. The PREA Manual states that fellow prisoners, staff, family, attorneys, and outside advocates shall be permitted to assist prisoners in filing PREA Grievances.

Macomb Correctional Facility received zero PREA grievances filed by a third party in the last twelve months. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard due to the policies and procedures in place and the information received from the inmate interviews. While there may have been no third party grievances filed inmates are aware that their family, friends, staff, attorney's, or other inmates can report incidents of sexual abuse or sexual harassment on their behalf.

115.52 f.

The PREA Manual and 03.03.140 states that a prisoner who believes they are subject to substantial risk of imminent sexual abuse may file an emergency PREA grievance. The emergency PREA grievance is forwarded to the Warden, or designee for immediate action. An initial response is required within 48 hours and the final decision shall be made and notification provided to the inmate within five calendar days. The initial response will address the prisoners claim of imminent risk and whether any imminent action is necessary. The final decision will document the determination of whether the inmate is in substantial risk of imminent sexual abuse and the action taken. Macomb Correctional Facility has not determined an inmate to be subject to a substantial risk of imminent sexual abuse in the last twelve months. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.52 g.

03.03.140 any prisoner who makes a false allegation of sexual abuse on a PREA grievance which is investigated and determined to be unfounded may be disciplined as per the Prisoner Discipline policy. The Prisoner Guidebook also notified inmates that making false allegations against staff and other inmates can result in disciplinary action. The Inmate Guidebook further states that it must be shown that the prisoner knew the allegation was false when the allegation was made and the grievance was filed intentionally. A review of unfounded investigation reports show that investigators note in their investigation report whether they believe the allegation to be made in bad faith. In the last twelve months one inmate was disciplined for filing a PREA grievance in bad faith. This auditor finds that Macomb Correctional Facility is compliant with provision g. of the standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.53 a.</p> <p>Macomb Correctional Facility has developed a relationship with Turning Point to provide victim advocacy as needed. Turning Point is an advocacy organization to end domestic and sexual violence. Turning Point provides advocacy and counseling services, forensic nurse examiners, and education to victims of sexual violence. Four copies of "An End to Silence" are in the facility's library. This booklet provides contact information for resources in Michigan. The facility also has posters in all housing units displaying the phone number for RAINN. These posters were observed by this auditor during the tour of the facility. Inmates are able to call RAINN's 1-800 support number free of charge. The JPAY system sends a monthly notification to inmates notifying them of RAINN services and the availability of the "An End to Silence" booklet. Inmates interviewed report being aware of the contact information for RAINN and that they are able to call anytime. Of the twenty-one inmates interviewed fifteen are aware of the services, four claim to not be aware, and two did not respond to this particular question. The staff who were informally interviewed during the on-site audit tour were aware of the services available and all control booths had the contact number for Turning Point. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.53 b.</p> <p>Policy directive 05.03.130 Prisoner Telephone Use states that all telephone calls are monitored unless they are a number on a universal list, a public official, or legal services. RAINN's hotline is on a universal list, therefore it is not monitored. The Prisoner Guidebook notifies the prisoners that calls may be monitored. Policy directive 05.03.118 Prisoner Mail states that prisoners shall be permitted to send sealed mail unless they are in any form of segregation other than protective segregation. If in segregation sealed mail can be sent to a licensed attorney, state or federal courts, Director or any other central office staff, staff at the institution, and media, all other mail will not be sealed. All mail may be opened and inspected unless it is clearly identified as being sent to a licensed attorney, state or federal courts, Director or any other central office staff, and staff at the institution. Inmates interviewed are aware that they can confidentially communicate with sexual abuse support services. Of the fifteen inmates who were interviewed regarding confidentiality of support services, thirteen report being aware that what is said to individuals from these services remains private and would not be listened to by anyone else. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.53 c.</p> <p>The facility PREA Coordinator confirmed that the facility has a long standing relationship with Turning Point for victim advocacy services and that qualified facility staff members have been identified and trained to provide advocacy services during forensic exams and investigatory interviews in the absence of a formal outside rape crisis advocate. A MOU does not exist between Turning Point and Macomb Correctional Facility however through interviews with the PREA Coordinator and PREA Analyst, it was determined that the agency and facility work collaboratively to establish relationships with outside support services. The facility has a long standing relationship with Turning Point, provides the RAINN information for inmates, and</p>

makes available the "An End to Silence" booklet. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.54 a. Through a review of the Ombudsman MOU, the Sexual Abuse Reporting Poster, the online reporting form (found on the Michigan Department of Corrections public website), and the PREA Manual this auditor finds that Macomb Correctional Facility is in compliance with 115.54 of the PREA standards. Third parties may use the internal kite system, call the reporting hot-line, contact the Legislative Ombudsman, access the agency's on-line reporting form, contact facility staff directly and file PREA grievances.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.61 a. The Michigan Department of Corrections (MDOC) PREA Manual and Policy Directive 03.03.140 "PREA and Prohibited Sexual Conduct Involving Prisoners" states that staff are required to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility involving a prisoner under the jurisdiction of the MDOC, regardless of where the incident took place. Random staff interviewed during the on-site audit report that MDOC requires reporting as per policy. Furthermore staff stated that reports of sexual abuse or sexual harassment allegations are to be made immediately and documented. Staff reported that they can make reports to their supervisor or call the hotline. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.61 b. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, contain distinct prohibitions against sharing any information received from a sexual abuse report. The only acceptable disclosures are relative to investigative, treatment, security and management decisions. Agency policy and random interviews with selected staff confirm that individuals within the facility are aware of their obligations to protect the confidentiality of the information they obtained from a report of sexual abuse. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.61 c. Policy 03.03.140 and the PREA Manual, which were reviewed by this auditor, clearly require medical and mental health care staff to report any knowledge of sexual abuse within an institutional setting. Clinicians are required to disclose their duties to report. Through formal and informal interviews with medical and mental health care staff, both classes of staff affirmed their obligation to disclose their limits of confidentiality before each encounter and all medical and mental health staff interviewed articulated their obligations to convey any reports of facility based sexual abuse to the PREA Coordinator at the facility. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.61 d. Agency policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, require the facility staff to report any allegation involving a victim under the age of 18 to the agency PREA Manager for forwarding to the proper state authorities under mandatory reporting laws. The facility does not house inmates under the age of 18 and has not had to make such reports during the audit period.</p> <p>The Warden's designee stated in an interview that the Macomb Correctional Facility does not house youthful offenders however if an allegation is made regarding someone considered a vulnerable adult under state or local law he would respond to the allegation in the same manner he would any other allegation but additional staff may be brought in to assist including a therapist. Notification would be made to the PREA Manager as required by policy.</p>

The agency PREA Manager confirmed in an interview that mandatory reports are forwarded to his attention and he is responsible for making the report to the mandated agency.

Through agency policy and interviews with the PREA Manager, the agency has sufficiently demonstrated that it has procedures in place for making necessary mandatory reports in compliance with the standard. Such reports have not come from the Macomb Correctional Facility; however, the agency has experience forwarding such reports to applicable state agencies. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.61 e.

Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, direct that all reports of sexual abuse and sexual harassment are brought to the attention of the appropriate supervisory staff and subsequently referred for investigation. A review of investigation files by this auditor confirms that this practice is carried out within the facility and the facility provided an example of third party allegations made to the Legislative Ombudsman. Investigative reviews provided adequate examples of written, verbal, staff suspicion, grievance and third party allegations that were immediately forwarded to the attention of investigatory staff. An interview with the Warden's designee confirms that investigations are conducted for all reports of sexual abuse and sexual harassment, regardless of how they were reported. The PREA Coordinator reviewed the investigation assignment process with this auditor. All allegations are forwarded to the PREA Coordinator and assigned to a specialized PREA investigator. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62 a.</p> <p>Policy directive 05.01.140 and the PREA Manual, which were reviewed by this auditor, state whenever a prisoner is subject to imminent risk of sexual abuse or is the alleged victim of sexual abuse, the facility shall take immediate action to protect the prisoner by preventing contact between the alleged abuser and alleged victim. Action to protect the prisoner may include, but is not limited to, changes in housing units and/or assignments, transfers, and stop orders.</p> <p>The agency head's designee confirms that action is taken immediately by the facility to protect inmates. The facility head is required to review the actions within 48 hours to ensure appropriate measures have been taken to protect potential victims. The Warden's designee reports that when he learns that an inmate is subject to substantial risk of imminent sexual abuse he removes the prisoner from the potential harm, investigates, isolates the predator and begins the criminal and misconduct process. Random staff interviewed report that if they learn an inmate is subject to a substantial risk of imminent sexual abuse they must separate the potential victim from the alleged perpetrator and contact a supervisor.</p> <p>Two grievances alleging substantial risk of imminent sexual abuse were filed in the last twelve months. This auditor was provided with investigation materials regarding both of these grievances to review which show that when an emergency grievance is filed regarding substantial risk of imminent sexual abuse the appropriate response and notifications are made.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with this standard.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.63 a. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, establish procedures for notifying other facilities of allegations of sexual abuse that did not occur in the receiving institution. The policy specifies that allegations must be forwarded by the facility head to facilities outside of the Department. Examples of 72 hour notifications were reviewed by this auditor which confirm that notifications are made as required by the standard.</p> <p>115.63 b. Policy directive 03.03.140 and the PREA Manual, which were reviewed by the auditor, establish procedures for notifying other facilities of allegations of sexual abuse that did not occur in the receiving institution within 72 hours. A review of notifications made indicate that Macomb Correctional Facility makes notifications within 72 hours as per policy and provisions a. and b. of the standard.</p> <p>115.63 c. 72 hour notifications are documented via email by the facility and samples were provided to the audit team for review.</p> <p>115.63 d. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, establish procedures for ensuring that any allegations received from other confinement facilities are investigated. The facility receiving the allegation must ensure the allegation was not previously investigated. If the allegation was not investigated, the facility shall conduct an investigation of the allegations. Both the agency head's designee and the Warden's designee both confirm that allegations received from other confinement facilities are properly investigated. The Warden's designee stated that the allegation is treated just as if it would if the inmate were still incarcerated in the facility.</p> <p>Macomb Correctional Facility received five reports in the last twelve months that an inmate was abused while confined at another facility. The facility's were notified of the allegation. The PREA Coordinator showed this auditor how he conducts follow-ups on all of those allegations until the investigation is completed. In the past twelve months Macomb Correctional Facility received five allegations of sexual abuse from other facilities. The PREA Coordinator showed this auditor how he conducts follow-up notifications for those allegations. If the facility is a Michigan Department of Corrections facility the PREA Coordinators for each facility are point of contacts for all allegations, if another non-MDOC facility is involved the PREA Coordinator remains the point of contact for Macomb Correctional Facility. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.64 a.</p> <p>The PREA Manual, which was reviewed by this auditor, requires the first responding security staff member to take the following four actions to ensure the safety of the victim and preservation of any forensic evidence should the allegation have taken place within a period of time for the collection of such evidence from the victim and the abuser: 1) separate the victim and abuser; 2) preserve and protect the crime scene; 3) request that the alleged victim does not take any actions that could destroy physical evidence; 4) ensure that the abuser does not take any actions that could destroy physical evidence.</p> <p>Security and non-security staff first responders were interviewed during the on-site portion of the audit regarding the actions taken when responding to an allegation of sexual abuse. Staff reported that they separate the victim from the perpetrator, preserve and protect the crime scene, and request that the alleged victim and perpetrator do not take any actions that could destroy physical evidence.</p> <p>Investigation files reviewed indicate swift and appropriate response to allegations. Macomb Correctional Facility reports that twenty-three allegations were made reporting sexual abuse, all twenty-three allegations resulted in security staff separating the alleged victim from the abuser, four allegations were made within a timeframe which allowed for evidence collection and the scene was preserved and protected, the victim and abuser were requested to not take any actions which could destroy physical evidence.</p> <p>Inmates who reported sexual abuse were interviewed and those who reported the alleged abuse directly to a staff member report assistance from staff immediately, those who reported via a PREA grievance process report a non-immediate response. Inmates interviewed stated that the staff asked questions regarding the event, referred to medical and/or mental health, reassessed for risk, and regular retaliation monitoring began. The majority of inmates interviewed reported receiving a swift response to the alleged incident. Those who allege to not have received a swift response reported via the PREA grievance process. Additional records were requested from Macomb Correctional Facility to review referral dates and response dates to allegations, six additional files were reviewed post audit to corroborate the facility policy on swift response to allegations. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.64 b.</p> <p>The PREA Manual, which was reviewed by this auditor, requires that a non-custody first responder staff immediately notify a supervisor in their chain of command for a referral to the facility Inspector. Non-custody staff are directed to request that the alleged victim not take any actions that could destroy physical evidence. There were four non-security first responders during the audit period. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.65 a.</p> <p>As required by the agency's PREA Manual the Macomb Correctional facility has developed its own operating procedures for agency policy directive 03.03.140. The document titled Operating Procedure 03.03.140, which was reviewed by the auditor, describes the procedures employed by the facility when responding to allegations of sexual abuse among supervisory, investigative staff and facility leadership. An interview was conducted with the Warden's designee in which he was asked about the facility's plan for a coordinated response to an incident of sexual abuse. The Warden's designee stated that all incidents are handled in a coordinated manner, everyone has a role, and all coordination is coordinated by the inspector or PREA Coordinator. This auditor finds that Macomb Correctional Facility is compliant with this standard.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.66 a.</p> <p>The MDOC's PREA Manual's language, which was reviewed by this auditor, mirrors the language of the standard. A review was conducted of the seven collective bargaining agreements entered into on behalf of the agency since the effective date of the PREA standards, includes agreements with the Michigan State Employee's Association (MSEA), American Federation of State, County, Municipal Employees (AFSCME), Michigan Corrections Organization (MCO), Service Employee's International Union (SEIU)-Scientific and Engineering bargaining unit, Service Employee's International Union (SEIU)-Technical bargaining unit, Service Employee's International Union (SEIU)-Human Services Support Bargaining Unit and United Auto Workers (UAW)-Administrative Support Unit and Human Services Unit. This auditor was satisfied that all agreements preserve the ability of the employer to remove alleged staff abusers from contact with inmates, consistent with the standard. Specifically, when warranted, the employer may take actions that include suspension of an employee during the course of an investigation. This suspension may continue until the time where disciplinary actions are determined. An interview with the agency head's designee confirms that the agency maintains the right to assign staff, even in the case of such employee winning a bid position. There are no terms within the bargaining contracts that prevent the employer from removing staff for cause during an investigation. This auditor finds that Macomb Correctional Facility is compliant with provision this standard.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.67 a. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor in determining compliance the standard, articulate that both staff and inmates who cooperate with sexual abuse and sexual harassment investigations shall be protected from retaliation from staff and inmates. The agency designates that Supervisory staff, other than the direct supervisor, shall monitor for retaliatory performance reviews, reassignments and other retaliatory action not substantiated as legitimate discipline or performance matter for staff. Supervisory staff shall also monitor for disciplinary sanctions, housing/program changes and also conduct periodic status checks for prisoners who report or have reported alleged victimization. At Macomb Correctional Facility, the Assistant Residential Unit Supervisors (ARUS) and the Prison Counselors are responsible for retaliation monitoring. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.67 b. Through interviews with the agency head's designee, the PREA Manager, the PREA Coordinator, and the Warden's designee, it is apparent that the Macomb Correctional Facility utilizes multiple methods to ensure that inmates and staff who report sexual abuse and sexual harassment or cooperate with investigations into such actions are protected from retaliation. An interview with the agency head's designee confirmed that retaliation is not tolerated and there are procedures to ensure that both staff and inmates are monitored at each facility. The Warden's designee was interviewed and asked what were some of the measures used to protect inmates and staff from retaliation. The Warden's designee stated that they use housing changes, transfers, removal of alleged abusers, emotional support, and any other measure needed contingent on the situation. The staff interviewed who are designated to monitor retaliation state that they make sure that everyone is aware of PREA and their right to report. The staff designated to monitor retaliation also ensure that housing changes, separations, and job changes are made as necessary. The monitors have weekly contact with the inmates who have reported sexual abuse to monitor for retaliation. The monitors report that they observe the inmates demeanor, appearance, communication, and disciplinary changes to detect possible retaliation. Inmates who reported sexual abuse were interviewed and the majority did not feel protected enough against revenge from staff or other inmates. In reviewing the interview notes this auditor notes that one inmate interviewed feels this way due to a recent misconduct for theft, another inmate feels that they are following up but not taking it seriously. This auditor reviewed the retaliation monitoring process and the CAJ 1022s, which are the Sexual Abuse Retaliation Monitoring forms and this auditor finds that Macomb Correctional Facility employs multiple protection measures and appropriate retaliation monitoring consistent with requirements of provision b. of the standard.</p> <p>115.67 c. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor in determining compliance with the standard, articulate that both staff and inmates who cooperate with sexual abuse and sexual harassment investigations shall be protected from retaliation from staff and inmates. The PREA Manual states that individuals who report sexual</p>

abuse are monitored for at least 90 days. The agency and the facility monitor for 90 days unless the allegation is unfounded, at which time, retaliation monitoring would cease. In the event retaliation is observed, policies ensure that it is remedied promptly and that monitoring can be extended beyond 90 calendar days if necessary. An interview with the Warden's designee and staff charged with retaliation monitoring confirm that if retaliation is noticed, it is referred for investigation.

The facility reported no instances of retaliation during the last twelve months. Investigatory files were reviewed for documentation of retaliation monitoring. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.67 d.

The Assistant Residential Unit Supervisors (ARUS) and Prison Counselors are charged with retaliation monitoring. The staff who monitor retaliation interviewed report that retaliation monitoring takes place for 90 days and considers a wide array of factors, such as work assignment changes, personal appearance and demeanor, and disciplinary changes. Monitoring is conducted by a review of these activities and face-to-face meetings, consistent with the standard. Investigatory files were reviewed and it was discovered that facility practice includes face-to-face contacts with applicable parties during the monitoring period. The facility monitors each individual on a weekly basis for 90 days or longer if necessary. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.67 e.

The PREA Manual, which was reviewed by this auditor, specifies that if any other individual who cooperates with an investigation and expresses a fear of retaliation, the Department shall take appropriate measures to protect that individual against retaliation, including 90 calendar day retaliation monitoring if deemed necessary. The agency head's designee and the Warden's designee both confirm in interviews that allegations of retaliation are taken seriously and investigated when reported by anybody who cooperates with sexual abuse and sexual harassment allegations. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.67 f.

The PREA Manual specifies that retaliation monitoring ceases when an allegation is unfounded. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.68 a.</p> <p>This auditor reviewed the PREA Manual in determining compliance with the standard. The PREA Manual contains language consistent with conditions with standard 115.43. One inmate in the past twelve months was held in involuntary segregated housing for ten days awaiting a transfer to another facility. The inmate was being transferred due to the suspect being a staff member and the facility layout. The determination to transfer the inmate was determined to be for protection and the least restrictive option.</p> <p>Interviews were conducted with the Warden's designee, staff who supervise inmates in segregated housing, and the PREA Coordinator regarding this standard. The Warden's designee reports that involuntary segregation for an alleged victim of sexual abuse is very rare, unless it is the only option to ensure the safety of the victim. The Warden's designee was adamant about only using involuntary segregation for alleged victims and inmates at high risk for victimization as a last resort. Staff that supervise inmates in segregated housing report that the facility typically tries to keep inmates out of segregation. Staff interviewed report that programs, privileges, education, and work assignments are restricted for inmates in segregation. Inmates typically do not spend more than thirty days in segregation, but if they do staff reports that reviews are done. This auditor reviewed OMNI reports that show placement dates for inmates placed in segregation which confirm that most inmates are placed in segregation for short time periods.</p> <p>No inmates were being housed for the purpose of protection from sexual victimization and who had alleged sexual abuse, during the on-site portion of this audit. This auditor finds that Macomb Correctional Facility is compliant with this standard.</p>

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.71 a.</p> <p>Policy directive 03.03.140 and the PREA Manual were reviewed by this auditor. These documents indicate that when an allegation of sexual abuse or sexual harassment is received, whether reported verbally or in writing, it shall be investigated. Staff shall ensure that all allegations are referred to the appropriate law enforcement agency in accordance with policy and law for criminal investigation. Referrals to law enforcement shall be documented in conjunction with the Michigan Department of Corrections' (MDOC) administrative investigation. Referrals to law enforcement shall be documented in the MDOC's investigative report, PREA investigation worksheet, and pertinent computerized database entries. A Warden's or Administrator's designee will refer the allegation no later than 72 hours after the report was made to the Internal Affairs Division by creating the AIPAS entry for each alleged incident. Policy requires that all reports, regardless of their source of origination, be taken and referred for investigation.</p> <p>This auditor interviewed two administrative investigative staff, and reviewed the investigation procedure with the PREA Coordinator. When an allegation of sexual abuse or sexual harassment is made the staff respond immediately by ensuring the safety of the inmate or inmates involved, secure the scene, and then contact the supervisor. All sergeants, lieutenants, captains, and inspectors are trained PREA Investigators. Once they are notified of an allegation they immediately begin an investigation by interviewing inmates and staff involved or with possible knowledge of the alleged incident and reviewing any relevant video surveillance. All reports of sexual abuse or harassment regardless of how reported are investigated thoroughly. This auditor reviewed twelve investigation files while on-site and confirmed that all allegations are thoroughly investigated. A review of investigation files included 3 Staff-on-Inmate sexual harassment allegations, 1 unsubstantiated, 1 unfounded, and 1 substantiated; 3 Staff-on-Inmate sexual abuse allegations, 2 unfounded and 1 unsubstantiated, 3 Inmate-on-Inmate sexual harassment allegations, 1 unfounded, 1 unsubstantiated, and 1 substantiated; and 3 Inmate-on-Inmate sexual abuse allegations, 1 substantiated, 1 unsubstantiated, and 1 unfounded. If the investigation finds that a criminal act took place a report will be made to the Michigan State Police. Macomb Correctional Facility has a great working relationship with the Michigan State Police and are in frequent communication with the Detective assigned to the facility. This auditor finds that Macomb Correctional Facility is compliant with provision a. of the standard.</p> <p>115.71 b.</p> <p>Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor, requires that investigators receive specialized training from the Training Division to be able to conduct sexual abuse investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>All investigators have been trained in specialized PREA investigator training utilizing the NIC</p>

Specialized Investigators course, Basic Investigative Training, and training in the Automated Investigation Management (AIM) system. Investigative staff, the Training Sergeant, and the PREA Coordinator were interviewed regarding training and training records were provided confirming all investigators have received the specialized PREA investigator training. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.

115.71 c.

The MDOC's basic investigator's training , which was reviewed by the auditor in determining compliance with the standard, provides sufficient background training to enable investigators to fulfill the elements set forth within the standards. Agency policy 03.03.140 and the PREA Manual outline the agency's goal to comply with the all elements noted in the standard, facility practice and a review of investigations demonstrate compliance with this standard.

All evidence gathered during the course of an investigation is kept with the investigation file and if criminal handed over to Michigan State Police. Files are maintained by the PREA Coordinator and retained in a secure area. Evidence collected includes video monitoring data, interviews, and photographs.

Investigative staff interviewed stated that their first steps in initiating an investigation is to immediately separate the victim from the perpetrator (provide emergency medical care if necessary), secure the scene of the incident, begin interviews, and gather time sensitive evidence such as video footage, bodily fluids, and photographs. The PREA Coordinator requires that all investigations are completed within 30 days and submitted to him for review. The investigation process was described as follows, 1) notification, 2) respond, 3) separate, 4) preserve the scene, 5) contact Turning Point (victim advocacy), make referrals as needed, 6) assess the incident and contact Michigan State Police if necessary, 8) collect evidence and conduct interviews, 9) address housing concerns, 10) submit report to PREA Coordinator. The investigators report that they would be responsible for gathering the following direct and circumstantial evidence: log book entries, round reader reports, physical evidence, reports from health care, DNA reports from MSP, photographs, clothing (victim and perpetrator), weapons, hospital reports and evidence, anything in the area such as sheets, pillows, restraints, and video footage. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.

115.71 d.

Basic Investigator's training and the PREA Manual, which were reviewed by this auditor, specify that when the evidence appears to support criminal prosecution, the assigned investigator shall coordinate interviews with law enforcement to avoid obstacles to subsequent criminal prosecution. In a review of investigations, there was no evidence of compelled interviews and multiple investigations were investigated by the Michigan State Police (MSP) and referred for prosecution appropriately. All investigators interviewed report that when there is evidence that a prosecutable crime may have taken place the MSP and prosecutor are contacted and all coordination of the investigation is maintained by the PREA Coordinator. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.

115.71 e.

The PREA Manual, which was reviewed by this auditor, states that an alleged victim's

credibility will be assessed on an individual basis and not determined by the persons status as an inmate or staff member. Interviews conducted with the investigative staff indicate that all investigations are conducted in the same manner, investigators "follow the evidence." On occasions where the victim or perpetrator is mentally impaired interviews may be conducted in a different manner, however all investigations are conducted regardless of prior unfounded allegations, or previous behavior of the alleged victim. Investigators and inmates who reported sexual abuse were interviewed and report not requiring the use of polygraph examination as a condition for proceeding with an investigation. A review of facility investigations revealed no use of truth-telling devices and individual credibility assessments were made consistent with the facts elicited. This auditor finds that Macomb Correctional Facility is compliant with provision e. of the standard.

115.71 f.

This auditor finds compliance with provision f. of 115.71 based on a review of facility investigations. These investigations demonstrated the consideration of physical and testimonial evidence, described investigative findings and facts and rationalized credibility in arriving at its conclusion. All 47 allegations were investigated, 13 were referred for criminal investigation, 7 of which were substantiated. An administrative investigation was conducted for all 47 allegations.

All investigations are done electronically in the AIM system. The AIM system prompts the investigator as to what needs to be included in the report such as description of evidence, interview summaries, video breakdowns, relevant documents such as questionnaires and face sheets, date/time/ and location of the alleged incident, investigative facts and findings. Investigative staff interviewed report that the consideration of staff actions or failure to act is all assessed. The investigators review the round reader reports, staff and inmate interviews, and video footage to evaluate if staff actions or failure to act may have contributed to the incident.

115.71 g.

A review of facility investigations by this auditor confirms that the facility has a great working relationship with the Michigan State Police and the District Attorney's Office. The MSP provides its reports to the investigators for inclusion in the facility's investigative file. According to interviews with the PREA Manager the Michigan State Police conduct criminal investigations and there was a request that the agency comply with applicable PREA standards. The auditor reviewed the PREA Manual which also requires that criminal investigative reports are generated to outline both physical and testimonial evidence, credibility assessments and investigative facts. Interviews with investigative staff found that all criminal investigations are documented and include thorough descriptions of physical, testimonial, and documentary evidence. MSP is provided a copy of all investigatory materials gathered by the facility's investigators and then MSP works in collaboration with the facility's investigators to complete the investigation. This auditor finds that Macomb Correctional Facility is compliant with provision g. of the standard.

115.71 h.

Through interviews with the PREA Coordinator, facility specialized investigators, and a review of investigations, this auditor confirms that allegations that were investigated by Michigan State Police during the audit period were reviewed for prosecution as required by provision h. of the standard. The auditor reviewed agency policies 03.03.140 and the PREA Manual. A

review of policy, coupled with an interview with the PREA Coordinator and facility investigators; this auditor is satisfied that Macomb Correctional Facility has sufficient procedures in place and has exercised those procedures to review allegations of criminal conduct for prosecution. All substantiated and unsubstantiated allegations of conduct that appears to be criminal is referred to the Michigan State Police for further investigation and prosecution.

115.71 i.

While on-site this auditor reviewed investigation files and the retention of such files. As per the PREA Manual all files are kept for as long as the alleged abuser is incarcerated or employed by the agency plus five years. This auditor finds that Macomb Correctional Facility is compliant with provision i. of the standard.

115.71 j.

The PREA Manual, which was reviewed by this auditor specifies that investigations will continue despite the departure of any alleged victim or abuser. A review of facility investigations produced no evidence that investigations were terminated due to the departure of a victim or an abuser. In reviewing the investigation procedures with the investigators interviewed on-site and the PREA Coordinator all allegations are investigated until the investigation is complete regardless of whether or not the alleged abuser or victim has left employment or control of the facility. All investigations are completed in their entirety. This auditor finds that Macomb Correctional Facility is compliant with provision j. of the standard.

115.71 l.

Macomb Correctional Facility has a great working relationship with Michigan State Police. A specific detective is assigned to the facility. The facility reports that they have a great relationship and communicate with the detective regularly.

Interviews were conducted with the Warden's designee, PREA Manager, PREA Coordinator, and investigative staff regarding outside agency investigations. All individuals interviewed report a great working relationship with Michigan State Police. Once an investigation is referred to MSP the facility PREA Coordinator and the investigators maintain communication with MSP and provide support as needed by setting up interviews, gathering video footage and other information. This auditor finds that Macomb Correctional Facility is compliant with provision l. of the standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.72 a.</p> <p>The PREA Manual and the Basic Investigator Training Manual, which were reviewed by this auditor specify that the agency's standard of proof is to be the preponderance of the evidence. A review of investigation files indicates that the facility's standard of proof is the preponderance of the evidence for all administrative investigations. The standard of proof is to be a preponderance of the evidence for the Michigan State Police, who conduct the criminal investigations for Macomb Correctional Facility. Investigators could articulate their knowledge of the evidentiary standard in investigations during formal interviews conducted as part of the on-site audit. Through a review of investigations, there appears to be sufficient application of this standard to find compliance.</p>

115.73	Reporting to inmates
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>115.73 a. Policy directive 03.03.140 and the PREA Manual, which were reviewed by the auditor, dictate that both the complainant and victim in alleged incidents of sexual abuse will be notified of the investigatory outcome. Both the Warden's designee and facility investigators confirm that inmate victims are notified of the investigatory results. The facility's PREA Coordinator is responsible for providing these notifications. Prior to the audit, Macomb Correctional facility provided sample documentation of an inmate notification to demonstrate compliance with the standard. During the onsite portion of the audit, the audit team collectively reviewed facility investigations and found evidence that victims of sexual abuse were notified of investigatory outcomes in each case. Inmates who reported sexual abuse also confirm that notifications are made as per the requirements of provision a. of the standards.</p> <p>115.73 b. Agency Policy 03.03.140 and the PREA Manual, which were reviewed by the auditor, dictate that both the complainant and victim in alleged incidents of sexual abuse will be notified of the investigatory outcome. The auditor interviewed the PREA Coordinator at the facility and reviewed facility investigations regarding these notifications. MSP communicated appropriately with the facility regarding the status of the investigations and the facility provided inmates with appropriate notifications as required by provision b. of the standard. This auditor finds that all allegations which appear to be criminal are sent to the Michigan State Police for further investigation and possible prosecution. The PREA Coordinator stays in communication with Michigan State Police until the investigation is completed and keeps the inmate abreast of all pertinent information regarding the investigation.</p> <p>115.73 c. Policy directive 03.03.140 and the PREA Manual, which were reviewed by this auditor indicates that both the complainant and victim in alleged incidents of sexual abuse will be notified of the investigatory outcome. The alleged victim is provided notification if the staff member is no longer posted within the inmate's housing unit, the staff member is no longer employed at the facility, the staff member has been indicted on a charge related to sexual abuse in the facility, and if the staff member has been convicted on a charge related to sexual abuse within the facility. This auditor finds that Macomb Correctional Facility is compliant with provision c. of the standard.</p> <p>115.73 d. The PREA Manual, which was reviewed by this auditor, indicates that the victim in alleged incidents of sexual abuse will be notified of criminal indictments and convictions. This auditor finds that Macomb Correctional Facility is compliant with provision d. of the standard.</p> <p>115.73 e. The PREA Coordinator keeps a log of all investigations which includes notifications. This auditor reviewed such logs as part of the on-site audit. A review of facility investigations yielded ample documentation of its notification of investigatory results. Within all sampled</p>	

investigations, a completed CAJ-1021 notification form was located as proof of inmate notification to demonstrate compliance with provision e. of the standard.

115.73 f.

The PREA Manual specifies that an obligation to notify an inmate of investigatory results terminates if the inmate is discharged from the facility's custody. This auditor finds that Macomb Correctional Facility is compliant with provision f. of the standard.

115.76	Disciplinary sanctions for staff
	<p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 376 360">115.76 a.</p> <p data-bbox="252 371 1453 663">The PREA Manual states that staff shall be subject to disciplinary sanctions up to and including discharge for violations of the sexual abuse and sexual harassment policies. Policy Directive 03.03.140 section T states that staff sexual harassment and sexual misconduct are violations of work rules and cites the Employee Discipline policy directive 02.03.100 which indicates that termination of employment is presumably the outcome if the violation is substantiated. Policy Directive 03.03.140 also notes that it is a felony for any employee to engage in sexual contact with an offender.</p> <p data-bbox="252 712 376 745">115.76 b.</p> <p data-bbox="252 757 1453 875">As per the PREA Manual and policy directive 02.03.100 Employee Discipline, the Discipline Standards for overly-familiar or unauthorized contact with an inmate, sexual conduct with an offender, and sexual harassment of an offender is presumptively termination.</p> <p data-bbox="252 925 376 958">115.76 c.</p> <p data-bbox="252 969 1477 1391">As per the PREA Manual disciplinary sanction for sexual harassment and other violation of the Department's sexual abuse or harassment policies and work rules shall be commensurate with policy and the nature and circumstances of the acts committed, the staff member's disciplinary history and sanctions imposed for comparable offenses committed by other staff with similar histories. This auditor discussed discipline of staff with the Warden's designee and the PREA Coordinator/Inspector during the on-site phase of the audit and they both confirmed that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.</p> <p data-bbox="252 1440 376 1473">115.76 d.</p> <p data-bbox="252 1485 1477 1906">The PREA Manual states that all staff, volunteers, or contractors who have been discharged for sexual abuse or sexual harassment of a prisoner shall be reported to law enforcement and appropriate licensing boards even if they resigned prior to discharge. This auditor reviewed investigation examples which were provided to this auditor of notifications of terminations and reports sent to licensing boards regarding sexual abuse and harassment allegations perpetrated by staff, volunteers and contractors. Furthermore, the review of the investigation files also confirmed that all staff-on-inmate investigations which resulted in the resignation or termination of the staff, contractor, or volunteer were referred to the Michigan State Police. In the past twelve months 2 staff violated the agency sexual abuse or sexual harassment policy and both were terminated, and the appropriate licensing boards were notified.</p> <p data-bbox="252 1955 1406 2033">This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard.</p>

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.77 a.</p> <p>The PREA Manual states that all staff, volunteers, or contractors who have been discharged for sexual abuse or sexual harassment of a prisoner shall be reported to law enforcement and appropriate licensing boards even if they resigned prior to discharge. Upon review of investigation files this auditor confirmed that the Macomb Correctional Facility reports all incidents involving staff, contractors, and volunteers which result in resignation or termination to the Michigan State Police.</p> <p>As per the PREA Manual any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with prisoners and shall be reported to law enforcement and appropriate licensing bodies. Upon review of investigation files this auditor confirms that that all contractors and volunteers who have been alleged to have sexually abused an inmate are prohibited from entering the facility until the investigation is completed. Upon completion of the investigation if the allegation is substantiated the appropriate licensing body and the Michigan State Police are notified.</p> <p>115.77 b.</p> <p>The 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 the sexual abuse and sexual harassment policies by a contractor or volunteer. The PREA Coordinator confirmed that the practice is once an allegation is made the volunteer or contractor is denied any further access to the facility pending the outcome of the investigation. If the investigation results in an unsubstantiated finding the facility administrator and the agency would need to review the case to determine if access to the facility would be reinstated. As per the PREA Coordinator there have been no instances where this has occurred. If the finding of the investigation is substantiated and it appears to be criminal in nature the Michigan State Police are contacted.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.78 a. b. c. d. e. f. g.</p> <p>The PREA Manual outlines prisoner discipline regarding PREA related incidents. Prisoners shall be subject to disciplinary sanctions as per policy directive 03.03.105 Prisoner Discipline for engaging in prisoner-on-prisoner sexual abuse. Sanctions shall be commensurate with the nature of the circumstances of the abuse, disciplinary history, and sanctions imposed for comparable offense. The PREA Manual states that a prisoner's mental disabilities or mental illness shall be considered when determining the type of sanction, if any, should be imposed. As per the PREA Manual therapy, counseling, or other interventions designed to address the underlying reasons or motivations for the abuse may be required of the perpetrator as a condition to access programming. As per Michigan law prisoners are unable to consent to sexual contact with MDOC employees, volunteers, or contractors. The prisoner may only be disciplined upon findings that show that the employee, volunteer, or contractor did not consent to the contact. As per the PREA Manual a report of sexual abuse made in good faith by a prisoner cannot result in discipline of that prisoner. Macomb Correctional Facility prohibits all sexual activity between inmates. The facility considers all consensual sexual activity to be a sexual misconduct.</p> <p>115.78 b. c.</p> <p>This auditor conducted an interview with the Warden's designee regarding disciplinary action for inmates following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The Warden's designee stated that sanctions are proportionate to the nature and circumstances of the abuses committed, the inmate's disciplinary histories, and the sanctions imposed for similar offenses by other inmates with similar histories. The Warden's designee also stated that mental disability or mental illness is also considered using a form from mental health to determine if there should be a misconduct sanction. This decision is dependent on the hearing officer, who is independent of the facility.</p> <p>115.78 d.</p> <p>Interviews were conducted with medical and mental health staff who confirmed that therapy, counseling, or other intervention services are offered which are designed to address and correct underlying reasons or motivations for sexual abuse and Macomb Correctional Facility considers offering these services to offending inmates. Staff also confirmed that an inmate's participation in such services is not required as a condition of access to programming or other benefits.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard.</p>

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.81 a. Macomb Correctional Facility Operating Procedure 03.03.140 section I. indicates that prisoners who disclose previous sexual victimization or perpetration during the Risk Assessment will be referred to Health Care and Mental Health for follow-up. As per the Michigan Department of Corrections PREA Manual if the risk assessment reveals that a prisoner has previously perpetrated or been a victim of sexual abuse in an institutional setting a follow up will be done by a medical or mental health practitioner within fourteen calendar days of the intake screening.</p> <p>115.81 b. Policy Directive 03.04.100 Health Services, section T. states that fourteen days after arrival at reception facility a comprehensive medical and physical examination will be completed by a medical provider, a comprehensive health appraisal including a psychological screening will be conducted, and a comprehensive assessment shall be conducted to determine history of sexual abuse or history of being a perpetrator of sexual abuse. Policy Directive 04.06.180 Mental Health Services section F. and H. state that qualified mental health professionals will be available to provide services in a timely manner.</p> <p>115.81 c. Policy Directive 04.01.105, Reception Facility Services section KK. states that any prisoner identified as having a history of physical or sexual abuse or who poses a reasonable concern that he/she may be a victim of sexual abuse during incarceration shall be referred to psychological services.</p> <p>115.81 b. c. Interviews with counselors who conduct the risk screening of victimization and abusiveness found that inmates who report prior sexual victimization or who have previously perpetrated sexual abuse are referred to mental health for follow-up. Three ROBERTA R's, which are referrals for mental health, were reviewed from counselors who completed risk assessments which indicated a history of victimization or that the inmate previously perpetrated sexual abuse. Inmates were interviewed who disclosed sexual victimization during their risk screening and they reported that they were referred to mental health and medical referrals are made when applicable. Sample documentation was provided to confirm that appropriate referrals are made to mental health. This auditor finds that Macomb Correctional Facility is compliant with provisions a. b. and c. of the standard.</p> <p>115.81 d. Macomb Correctional Facility Operating Procedure 03.03.140 section J. states that reasonable steps will be taken to ensure confidentiality of information obtained during the risk assessment process. In review of counselor files it was noted that prior risk assessments are in the inmate files. All assessments are stored electronically therefore it is not necessary to have a paper copy in the inmate file. The corrective action recommendation was made to issue a memo to remove these risk assessments from inmate files upon the annual file review.</p>

This auditor has been in communication with the MDOC PREA Analyst and the PREA Coordinator who note that the memo is awaiting signature from the deputy director, once signed it will be distributed statewide. During the post on-site audit phase the Macomb Correctional Facility PREA Auditor distributed a directive via email to all staff who conduct risk assessments. The directive is to remove all risk assessments from inmate files upon review of the inmate file at time of intake or at the time of the annual risk assessment and file review. This directive is in compliance with the corrective action recommended by the PREA Auditor, therefore Macomb Correctional Facility is compliant with provision d. of the standard.

115.81 e.

Michigan Department of Corrections PREA Manual states that any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other designated staff as necessary to inform treatment plans and security and management decisions. Michigan Department of Corrections PREA Manual states that medical and mental health care staff shall obtain informed consent from prisoners before reporting information about prior sexual victimization that did not occur in an institutional setting. Section T. states that any allegations of alleged victims under the age of 18 or considered a vulnerable adult under statute will be reported to the PREA Manager. Interviews conducted with the Health Unit Manager and medical and mental health staff confirm that informed consent is obtained before reporting about prior sexual victimization that did not occur in an institutional setting. Macomb Correctional Facility does not house inmates under the age of 18 therefore they do not have a separate informed consent process for inmates under the age of 18. This auditor finds that Macomb Correctional Facility is compliant with provisions d. and e. of the standard.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.82 a. Macomb Correctional Facility Operating Procedure 03.03.140 section Q. states that prisoners who report they have been a victim of sexual abuse or misconduct will be referred to the Bureau of Health Care Services. Michigan Department of Corrections Operating Procedure 03.04.100H Health Care Management of Reported Sexual Assaults of Prisoners in CFA Facilities outline the process and timeline for treatment. Within 24 hours of identification of victimization the prisoner must receive an evaluation from a Qualified Mental Health Professional. Policy Directive 03.04.125 Medical Emergencies section F. states that within four minutes of the identification of a medical emergency initial staff response must begin. Policy Directive 04.06.180 Mental Health Services section F. states that qualified mental health professionals will be available, care will be provided in a timely manner, and prisoners will have reasonable access to services.</p> <p>Inmates interviewed who had reported sexual abuse stated that they received mental health services but not medical services following their reported abuse. More than half the inmates interviewed who had reported sexual abuse did not feel that mental health services were provided to them in a timely fashion. All medical and mental health staff interviewed report that inmate victims of sexual abuse are always checked in health care immediately to ensure there are no emergency injuries which need immediate treatment, first responders interviewed report that medical and mental health are immediately notified upon notification of a sexual abuse. Six mental health referrals for victims of a sexual misconduct allegations were reviewed. All six referrals were seen within seventy-two hours of the referral. Based on staff interviews, referral reviews, and policy review this auditor finds that Macomb Correctional Facility is compliant with this provision a. of the standard.</p> <p>115.82 b. As per the Michigan Department of Corrections PREA Manual first responder duties are to separate the victim from the abuser, preserve and protect the crime scene. First responders interviewed reported that they separate the victim and abuser, preserve and protect the crime scene and any physical evidence, and immediately notify medical and mental health practitioners. This auditor finds that Macomb Correctional Facility is compliant with provision b. of the standard.</p> <p>115.82 c. As per the PREA Manual and operating procedure 03.04.100H, which was reviewed by this auditor, all victims of sexual abuse, while incarcerated shall be offered information about and access to emergency contraception and sexually transmitted infection prophylaxis.</p> <p>115.82 d. Per Policy Directive 03.04.100 UU. and VV. treatment services for victims of sexual abuse will be offered free of charge. Per the PREA Manual treatment services will be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates in the investigation. Inmate and medical and mental health staff interviews were conducted on-</p>

site which confirm that there is no cost to victims of sexual abuse for treatment services provided at the facility or the hospital.

An interview was conducted with the Health Unit Manager in which she explained that upon notification of a sexual abuse allegation medical services are immediately provided and based on the timeline and severity the inmate may be sent to the hospital for a sexual assault forensic exam. Staff interviewed stated that upon notification of a sexual abuse they will first ensure the safety of the victim, preserve the crime scene, and notify supervisors and medical. The Health Unit Manager explained that all inmates who have been involved in a sexual abuse incident are offered medical services including information and access to sexually transmitted infections prophylaxis when appropriate. The Health Unit Manager confirmed that all inmates are offered services regardless of whether they cooperate in the investigation. This auditor finds that Macomb Correctional Facility is compliant with provisions c. and d. of the standard.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.83 a. Policy Directive 03.04.100 Health Services sections UU. and VV. facilities shall offer medical and mental health care to prisoner who have been victimized by sexual abuse. Operating Procedure 03.04.100H Health Care Management of Reported Sexual Assaults policy states that all prisoners who have allegedly been sexually assaulted shall receive prompt medical and mental health care. Policy Directive 04.06.180 Mental Health Services sections F. and H. state that qualified mental health professionals will be made available for crisis intervention.</p> <p>115.83 b. The Health Unit Manager was interviewed and confirmed that all inmates who have been victimized by sexual abuse are offered a medical and mental health evaluation. Follow-up services, treatment plans, and referrals are provided as needed. If the inmate is transferred follow up continues and is monitored by the facility's PREA Coordinator. As per the Health Unit Manager inmate victims of sexual abuse are offered tests and prophylaxis for sexually transmitted diseases free of charge. The Health Unit Manager noted that often times if the inmate is sent to the hospital these tests and medications are done while at the hospital. Medical and mental health services offered are consistent with those in the community.</p> <p>115.83 c. The PREA Manual states that the facility shall offer medical and mental health evaluations and as appropriate, treatment that is necessary and consistent with the community level of care to prisoners who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. This includes follow-up services, treatment plans, and when necessary referrals. The PREA Coordinator, Health Unit Manager, and the Residential Treatment Unit Chief confirmed through interviews that medical and mental health evaluations followed by appropriate treatment is provided to all alleged victims of sexual abuse and those services are consistent with the community level of care.</p> <p>115.83 f. The PREA Manual states that prisoner victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections/diseases as deemed medically appropriate. This was confirmed through interviews with medical staff and the Health Unit Manager.</p> <p>115.83 g. Policy Directive 03.04.100 Health Service section VV. states that prisoner victims of sexual abuse shall be offered testing for sexually transmitted diseases. Policy Directive 03.04.100H Health Care Management of Reported Sexual Assaults of Prisoners in CFA Facilities section 11. notes that the local emergency room will provide testing and counseling as appropriate. Per Policy Directive 03.04.100 UU. and VV. treatment services for victims of sexual abuse will be offered free of charge. Per PREA Manual treatment services will be provided to the victim without financial cost regardless of whether the victim names the abuser or cooperates in the investigation. As per the PREA Manual prisoners who have been identified as having been perpetrators of sexual abuse shall be referred for a follow-up meeting with a mental health</p>

practitioner within fourteen days.

115.83 h.

As per policy and upon review of files all known inmate-on-inmate abusers are provided a mental health evaluation within sixty days of learning of such abuse history. Interviews conducted with the mental health staff confirm that inmates who are identified as abusers are referred for a mental health evaluation. The policy states that evaluations are to be conducted within sixty days of learning of the abuse history, however mental health staff interviewed report that evaluations are typically conducted as soon as possible.

This auditor finds that Macomb Correctional Facility is compliant with all provisions of the standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.86 a. As per the April 2017 Michigan Department of Corrections PREA Manual incident reviews are to be conducted at the conclusion of every sexual abuse investigation unless it was determined to be unfounded. The review must occur within thirty (30) days of the conclusion of the investigation. During the on-site audit files of completed investigations were reviewed for compliance. Documentation of the incident review is maintained in the investigation file. Upon completion of every investigation a memo is sent by the PREA Coordinator to the Warden and an Incident Review is conducted with management staff and then sent to the PREA Manager's office.</p> <p>115.86 b. Incident Reviews occur within 30 days of the conclusion of the investigation as per the PREA Manual and further evidenced by a review of closed investigation files during the on-site phase of the audit.</p> <p>115.86 c. As per the Michigan Department of Corrections PREA Manual (April 2017) the incident review team includes upper-level custody and administrative staff, with input from supervisory staff, investigators, and medical or mental health practitioners or others as appropriate. As per the PREA Coordinator and Deputy Warden these Incident Reviews are typically conducted following Executive Staff meetings and the Warden, Deputy Wardens, Health Unit Manager, Mental Health Administrator, investigators, and other relevant supervisory staff are present.</p> <p>115.86 d. Macomb Correctional Facility completes a report which address the following: whether the allegation or investigation indicates a need to change policy or practice to prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race, ethnicity, gender identity, LGBTI status, gang affiliation, or any other group dynamic at the facility; were there physical barriers in the area where the alleged incident occurred which may have enabled the abuse; assessment of staffing levels to check for adequacy; and assessment of monitoring technology. If any changes are recommended regarding policy, staffing, or video surveillance the Incident Review is then sent to central office where the agency's administration makes the final determination.</p> <p>115.86 e. Upon review of the investigation files no Incident Review within the last twelve months resulted in any recommendations.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with all provisions of the standard.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.87 a. b. c. Macomb Correctional Facility logs all reported allegations of sexual abuse into a computerized database. The information submitted into the database is compiled into an annual incident report. This report includes all information needed to complete the Department of Justice Survey on Sexual Violence. As per the Michigan Department of Corrections PREA Manual all sexual abuse data is maintained for ten years.</p> <p>115.87 d. The Macomb Correctional Facility utilizes data collected from incident-based documents, including reports, investigations, and incident reviews. Michigan Department of Corrections publishes the annual statistics on their public website. An agency wide annual report from 2016 was provided to this auditor on-site which provides more in depth information regarding the Prison Rape Elimination Act implementation throughout the state. The report lists the PREA Audit results for facilities audited, allegation statistics, definitions, and a comparison of statistics from 2015 - 2016. This auditor finds that Macomb Correctional Facility is compliant with all provisions of the standard.</p> <p>115.87 f. The Survey of Sexual Victimization was submitted for calendar year 2016 and is posted on the Michigan Department of Corrections public website.</p>

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.88 a. The Macomb Correctional Facility completes an annual report which details statistics of reported allegations of sexual abuse or harassment by type, these statistics are included in an annual agency wide report for the Michigan Department of Corrections. A review of memos which accompanied reports indicate that Michigan Department of Corrections reviews the data annually and makes determinations regarding the need for staffing, facility upgrades, training, policy and procedures. Interviews were conducted with the agency head designee, the PREA Coordinator, and the Department's PREA Manager. All individuals interviewed stated that incident-based sexual abuse data is assessed to determine if any problematic areas or staff exist, if certain facilities need more support, and annual data is compared with previous years to note any trends.</p> <p>115.88 b. The Macomb Correctional Facility completes an annual report which details statistics of reported allegations of sexual abuse or harassment by type, these statistics are included in an annual agency wide report for the Michigan Department of Corrections.</p> <p>115.88 c. The annual report is a comparison of the last two calendar years. The annual report is published on the Michigan Department of Corrections website.</p> <p>115.88 d. All identifying information is redacted from all publicly available documents.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.89 a. As per the Michigan Department of Corrections (MDOC) PREA Manual all data is maintained for ten years. The MDOC established procedures within its PREA Manual to direct that data must be securely retained. The MDOC PREA Manager reported that he alone has access to the agency's overall data pool for PREA. There are a limited number of upper agency administrators above the PREA Manager's rank who would have access to the agency investigation database.</p> <p>115.89 b. Data is published on the Michigan Department of Corrections website. In review of published data all personal identifiers have been removed. The agency's annual PREA statistical report and surveys of sexual violence are posted on the agency's website.</p> <p>115.89 c. The Michigan Department of Corrections removes all personal identifiers before making sexual abuse data publicly available. This auditor reviewed all documents available to the public on their PREA specific website and verified that no personal identifying information is present in any document.</p> <p>115.89 d. The Michigan Department of Corrections maintains sexual abuse data for at least ten years after the date of the initial collection as per the PREA Manual.</p> <p>This auditor finds that Macomb Correctional Facility is compliant with all provisions of this standard.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 a. Michigan Department of Corrections does not have all of its facilities audited, however the agency entered into a consortium to conduct all audits in all of its facilities during the second audit cycle.</p> <p>115.401 b. This auditor is able to confirm that one third of the MDOC's facilities are being scheduled for and audited each year of the cycle due to the consortium and conversation with the PREA Manager responsible for coordinating and scheduling the audits.</p> <p>115.401 h. This auditor had unimpeded access to all areas of the Macomb Correctional Facility during the on-site audit. The PREA Coordinator, Analyst, Compliance Manager, Captain, and a prison counselor accompanied the auditors on the tour. All structures and areas in which inmates have access to were toured.</p> <p>115.401 i. All requested documents were received.</p> <p>115.401 m. The auditors were provided private areas to conduct interviews of both inmates and staff.</p> <p>115.401 n. PREA Audit notifications were posted in all housing units and in the lobby area six weeks prior to the on-site audit. An address was provided on this notification which inmates could send confidential correspondence to the auditor.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.401 f. Michigan Department of Corrections has published on its agency website all Final Audit Reports from 2015-2016 and 2016-2017 calendar years.</p>

Appendix: Provision Findings

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	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

115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)	na

115.13 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into	yes

	consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?	
	Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20,2017.)	na

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

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

115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency: perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes

115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.)	yes

115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received such education?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment?	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment?	yes

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere?	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31?	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32?	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a: Referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Request?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

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

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status?	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security?	yes

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	no

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes

115.73 (c)	Reporting to inmates	
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

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

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	na

115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na

115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	no

115.401 (b)	Frequency and scope of audits	
	During each one-year period starting on August 20, 2013, 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?	yes

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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