PREA Facility Audit Report: Final

Name of Facility: Worcester County Jail & House of Corrections

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/07/2022

Auditor Certification		
The contents of this report are accurate to the best of my knowledge.		V
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.		V
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.		V
Auditor Full Name as Signed: Amy J. Fairbanks Date of Signature: 10/07/2022		

AUDITOR INFORMATION	
Auditor name:	Fairbanks, Amy
Email:	fairbaa@comcast.net
Start Date of On-Site Audit:	08/10/2022
End Date of On-Site Audit:	08/12/2022

FACILITY INFORMATION	
Facility name:	Worcester County Jail & House of Corrections
Facility physical address:	5 Paul X Tivnan Drive , West Boylston , Massachusetts - 01583
Facility mailing address:	

Primary Contact	
Name:	Keith Hamilton
Email Address:	khamilton@sdw.state.ma.us
Telephone Number:	508-854-1800 EX 2826

Warden/Jail Administrator/Sheriff/Director	
Name:	Superintendent David Tuttle
Email Address:	davidt@sdw.state.ma.us
Telephone Number:	508-854-1802

Facility PREA Compliance Manager	
Name:	Jason Butland
Email Address:	jbutland@sdw.state.ma.us
Telephone Number:	O: 508-854-1989

Facility Health Service Administrator On-site	
Name:	Lynne Gillis
Email Address:	LyGillis@Wellpath.us
Telephone Number:	508-854-1852

Facility Characteristics	
Designed facility capacity:	1251
Current population of facility:	648
Average daily population for the past 12 months:	574
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-78
Facility security levels/inmate custody levels:	Maximum, Medium and Minimum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	520
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	54
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	93

AGENCY INFORMATION	
Name of agency:	Worcester County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	5 Paul X. Tivnan Drive , West Boylston, Massachusetts - 01583
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	Lewis Evangelidis
Email Address:	levangelidis@sdw.state.ma.us
Telephone Number:	5088541801

Agency-Wide PREA Coordinator Information			
Name:	Keith Hamilton	Email Address:	khamilton@sdw.state.ma.us

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

POST-AUDIT REPORTING INFORMATION			
GENERAL AUDIT INFORMATION			
On-site Audit Dates			
Start date of the onsite portion of the audit:	2022-08-10		
2. End date of the onsite portion of the audit:	2022-08-12		
Outreach			
10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	⊙ Yes ⊙ No		
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	JD, Pathways for Change		
AUDITED FACILITY INFORMATION	ON		
14. Designated facility capacity:	1251		
15. Average daily population for the past 12 months:	574		
16. Number of inmate/resident/detainee housing units:	16		
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	 Yes No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility) 		
Audited Facility Population Characteristics Audit	on Day One of the Onsite Portion of the		
Inmates/Residents/Detainees Population Characteristics	on Day One of the Onsite Portion of the Audit		
36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	635		
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2		
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	5		
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0		

Random Inmate/Resident/Detainee Interviews	
Inmate/Resident/Detainee Interviews	
INTERVIEWS	
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	20
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	141
Staff, Volunteers, and Contractors Population Characteri	I stics on Day One of the Onsite Portion of the Audit
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	4
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	3
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	3
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	4
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	15
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	 ✓ Age ✓ Race ✓ Ethnicity (e.g., Hispanic, Non-Hispanic) ✓ Length of time in the facility ✓ Housing assignment ✓ Gender ☐ Other ☐ None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Based selection of housing unit rosters and information provided regarding race, etnicity and age.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	⊙ Yes ⊙ No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	There were no barriers; I was able to interview anyone requested in a private setting.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	15
As stated in the PREA Auditor Handbook, the breakdown of targeted in cross-section of inmates/residents/detainees who are the most vulneral questions regarding targeted inmate/resident/detainee interviews below satisfy multiple targeted interview requirements. These questions are a inmate/resident/detainee protocols. For example, if an auditor interview housing due to risk of sexual victimization, and disclosed prior sexual withose questions. Therefore, in most cases, the sum of all the following categories will exceed the total number of targeted inmates/residents/or not applicable in the audited facility, enter "0".	able to sexual abuse and sexual harassment. When completing w, remember that an interview with one inmate/resident/detainee may asking about the number of interviews conducted using the targeted ws an inmate who has a physical disability, is being held in segregated victimization, that interview would be included in the totals for each of responses to the targeted inmate/resident/detainee interview
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	3

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

68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	 ✓ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Throughout the audit experience, many conversations occurred regarding placement of those who reported victimization. No one deemed to be at "high" risk for victimization.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Staff, Volunteer, and Contractor Interviews Random Staff Interviews	
,	12
Random Staff Interviews 71. Enter the total number of RANDOM STAFF who were	In Items It
Random Staff Interviews 71. Enter the total number of RANDOM STAFF who were interviewed: 72. Select which characteristics you considered when you	 ✓ Length of tenure in the facility ✓ Shift assignment ✓ Work assignment ✓ Rank (or equivalent) ✓ Other (e.g., gender, race, ethnicity, languages spoken)

74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	There were no barriers to interviewing anyone I selected.		
Specialized Staff, Volunteers, and Contractor Interviews			
Staff in some facilities may be responsible for more than one of the sp apply to an interview with a single staff member and that information w	ecialized staff duties. Therefore, more than one interview protocol may rould satisfy multiple specialized staff interview requirements.		
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):			
76. Were you able to interview the Agency Head?	⊙ Yes		
	C No		
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	• Yes		
Director/Superintendent of their designee:	C No		
78. Were you able to interview the PREA Coordinator?	• Yes		
	C No		
79. Were you able to interview the PREA Compliance Manager?	• Yes		
	C No		
	NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)		

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	Agency contract administrator Agency contract administrator Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment Line staff who supervise youthful inmates (if applicable) Education and program staff who work with youthful inmates (if applicable) Medical staff Mental health staff Non-medical staff involved in cross-gender strip or visual searches Administrative (human resources) staff Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff Investigative staff responsible for conducting administrative investigations Investigative staff responsible for conducting criminal investigations Staff who perform screening for risk of victimization and abusiveness Staff who supervise inmates in segregated housing/residents in isolation Staff on the sexual abuse incident review team Designated staff member charged with monitoring retaliation First responders, both security and non-security staff Intake staff Intake staff
If "Other," provide additional specialized staff roles interviewed:	Grievance coordinator, food service staff, Education Director.
81. Did you interview VOLUNTEERS who may have contact	⊙ Yes
with inmates/residents/detainees in this facility?	© Yes
a. Enter the total number of VOLUNTEERS who were interviewed:	1

b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	 ☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☑ Religious ☐ Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	⊙ Yes ⊙ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	 □ Security/detention □ Education/programming ☑ Medical/dental □ Food service □ Maintenance/construction □ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.
SITE REVIEW AND DOCUMENTA	ATION SAMPLING
Site Review	
PREA Standard 115.401 (h) states, "The auditor shall have access to the requirements in this Standard, the site review portion of the onsite site review is not a casual tour of the facility. It is an active, inquiring p whether, and the extent to which, the audited facility's practices demonthe site review, you must document your tests of critical functions, impidentified with facility practices. The information you collect through the your compliance determinations and will be needed to complete your	audit must include a thorough examination of the entire facility. The rocess that includes talking with staff and inmates to determine enstrate compliance with the Standards. Note: As you are conducting cortant information gathered through observations, and any issues a site review is a crucial part of the evidence you will analyze as part of
84. Did you have access to all areas of the facility?	⊙ Yes
	C No
Was the site review an active, inquiring process that incl	uded the following:
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	⊙ Yes ⊙ No

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	⊙ Yes ⊙ No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	⊙ Yes ⊙ No
88. Informal conversations with staff during the site review (encouraged, not required)?	• Yes • No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-such as staff, contract supervisory rounds logs; risk screening and intake processing records auditors must self-select for review a representative sample of each ty	; inmate education records; medical files; and investigative files-
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	⊙ Yes ⊙ No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	There were no barriers to provision of any documents requested.
SEXUAL ABUSE AND SEXUAL H	IARASSMENT ALLEGATIONS

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on- inmate sexual abuse	3	1	2	1
Staff-on-inmate sexual abuse	5	0	5	0
Total	8	1	7	1

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

	# of sexual harassment allegations	# of criminal	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	0	6	0
Staff-on-inmate sexual harassment	4	0	4	0
Total	10	0	10	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	1	1	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	1	1	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	2	1
Staff-on-inmate sexual abuse	0	5	1	0
Total	0	5	3	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	1	0	5	0
Staff-on-inmate sexual harassment	1	2	1	0
Total	2	2	6	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review 8 98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled: Yes 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? O No O NA (NA if you were unable to review any sexual abuse investigation files) Inmate-on-inmate sexual abuse investigation files 100. Enter the total number of INMATE-ON-INMATE SEXUAL 3 ABUSE investigation files reviewed/sampled:

101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations? 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) Yes No NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	5
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Revie	w
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	10
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	 Yes No NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3

109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations? 110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) Yes No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files) 	
Staff-on-inmate sexual harassment investigation files		
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	2	
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) 	
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	 Yes No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) 	
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.	
SUPPORT STAFF INFORMATION		
DOJ-certified PREA Auditors Support Staff		
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes⊙ No	
Non-certified Support Staff		
116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes○ No	

AUDITING ARRANGEMENTS AND COMPENSATION			
121. Who paid you to conduct this audit?	The audited facility or its parent agency		
	My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)		
	 A third-party auditing entity (e.g., accreditation body, consulting firm) 		
	○ Other		

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA Worcester County Sheriff's Office
- · Policy 914.11 Sexual Harassment
- Policy 914.12 Staff/Inmate Relations
- Organization Chart
- Interview with the PREA Coordinator
- · Memo appointing the PREA Coordinator to oversee these duties
- Interview with the PREA Compliance Manager (PCM)
- Memo appointing the PCM 10/1/2020
- · Interview with the Sheriff
- · Interview with the Superintendent
- · Observations during the audit
- · FAQ

The following policy excerpts demonstrate the facility's commitment to the requirements of zero tolerance for sexual abuse and harassment as well as an outline for preventing, detecting, and responding to allegations of sexual harassment and abuse.

Policy - PREA Worcester County Sheriff's Office

Worcester County Sheriff's Office (WCSO) is committed to Zero Tolerance prevention and elimination of sexual abuse perpetrated against inmates by staff members or other inmates. Meeting the objectives set forth within the Prison Rape Elimination Act of 2003 is a major priority for the Sheriff's Office and an ongoing focus for staff efforts at all levels of this organization. The Department's zero tolerance policy for sexual abuse and sexual harassment.

The Department has a zero-tolerance policy for any conduct that constitutes sexual relations with or sexual abuse of inmates. (PREA 115.11) 2. The Department has a zero-tolerance policy for discrimination and mistreatment of inmates on the basis or sexual orientation or gender identity.

All intentional acts of sexually abusive behavior or intimacy between an inmate and a Sheriff's Office employee, contractor or volunteer, or between an inmate and another inmate regardless of consensual status, are prohibited and the perpetrator shall be subject to administrative, criminal and/or disciplinary sanctions. The Sheriff's Office is committed to investigating, disciplining and referring for prosecution, Sheriff's Office employees, contractors, volunteers and inmates who engage in sexually abusive behavior. This policy is intended to complement and not replace or contradict Policy 914.11 – Sexual Harassment or Policy 914.12 – Staff/ Inmate Relations

The Department shall appoint a PREA Coordinator. The PREA Coordinator shall be appointed by the Superintendent or designee. The PREA Coordinator will have direct access to the administration and sufficient time to prioritize the implementation and monitoring of PREA. (PREA 115.11(b)) (See Attachment 1)

Policy 914.11 Sexual Harassment provides detailed information describing behavior that constitutes sexual harassment and additionally supports that retaliation is against the law. The Sexual Harassment Grievance Office is also the PREA Compliance Manager.

Policy 914.12 Staff/Inmate Relations states, the purpose of this policy is to establish procedures regarding the prohibition, reporting, and investigation of staff fraternization, intimacy, and sexual misconduct with inmates and others in the custody of the Sheriff's Office.

(a) Policy, as illustrated above, outlines the commitment to, goals for achievement and efforts to prevent, detect and respond to sexual abuse and sexual harassment. The complete policy is nineteen (19) pages and documents in detail how the

agency will comply with all the PREA standards Definitions of prohibited behaviors are addressed in this policy (and noted in the narrative to standard 115.87). The policy addresses searches, training, classification, human resources, grievances regarding sexual abuse, prevention, intervention/medical and mental health services, investigations, allegations against staff, contractors and volunteers, response to investigations, data collection and analysis.

- (b) The organization chart demonstrates that the Assistant Superintendent reports directly to the Superintendent. A memo appoints the Captain as the PREA Coordinator authored by the Superintendent. During his interview, he indicated he has been actively involved in the efforts to prevent, detect and respond to sexual abuse and sexual harassment since being assigned to the position. The interview with the PREA Coordinator and Superintendent confirmed to the auditor that he is given authority to work directly with the Superintendent, security, medical/mental health staff and internal investigators in conjunction with the PREA Compliance Manager/Assistant Superintendent on any PREA issues that arise. This was evident to the auditor during the on-site audit. The auditor found sufficient evidence to support the following:
- · Direct access to the agency's most senior leader or chief executive officer (e.g., Director, Secretary, Commissioner, Administrator, etc.);
- Direct access to the agency's executive or senior leadership team; and
- The influence necessary to create and implement agency-wide policies, procedures, and practices, without any interference from other levels of bureaucracy or supervision, and in accordance with the PREA standards and interpretative guidance issued by DOJ as clarified in the FAQ issued December 2015.
- (c) The agency has appointed a PREA Compliance Manager (PCM), who also serves as Assistant Superintendent of Security. An appointment letter confirms the support of the Superintendent to exercise authority to implement PREA requirements. This is supported in the policy. The interview with the PREA Compliance Manager supports that he has sufficient time and authority to address all matters regarding PREA. His position of Assistant Superintendent which oversees training, accreditation, and policy/procedure development affords him to be actively involved with all aspects of the operations to ensure the agency is meeting PREA standards. This was observed by the auditor during the onsite audit. The auditor found sufficient evidence to support the following:
- · Direct access to the facility's most senior leader or chief executive officer (e.g., Director, Warden, Superintendent, etc.);
- Direct access to the facility's executive or senior leadership team;
- Direct access to the agency's PREA Coordinator;
- · Comprehensive knowledge of the overall operations of the facility, and the various departments/divisions within the facility;
- Full access to all relevant information related to the facility's compliance with the PREA standards (e.g., PREA policies and procedures, data collected regarding the incidence and prevalence of sexual abuse and sexual harassment in the facility, sexual abuse and sexual harassment investigative files, relevant portions of training and personnel files, etc.); and
- The influence necessary to lead, coordinate, guide, and monitor successful ongoing implementation of policies and procedures that comply with the PREA standards across all departments/divisions within the facility, with support from other levels of facility bureaucracy or supervision, and in accordance with the PREA standards and interpretative guidance issued by DOJ as clarified in the FAQ issued December 2015.

The PREA Coordinator and PCM are part of the training team. Additionally, this agency/facility utilized a team of five staff, actively involved with the auditor during the onsite visit, addressing any needs/questions that the auditor had.

Summary of evidence to support a finding of compliance: Policy reinforces the requirements of the provisions of this standard. Interviews with the Sheriff and Superintendent provided assurance to the auditor that the law and the requirements to prevent, detect and respond to sexual abuse, sexual harassment and retaliation are an integral part of the operations at this facility. Interview with the PREA Coordinator and PREA Manager all demonstrate a commitment to compliance with all PREA standards, demonstrating during interviews and observations of interaction with staff that they have authority and are involved in all processes to ensure the requirements are met and are effective. In accordance with the FAQ clarification, issued by the DOJ, the PREA Coordinator does has access to the Sheriff/Superintendent, and Assistant Superintendents and demonstrated to the auditor his influence in managing PREA related duties as well as access to all areas of the facility. Observations made during the audit process which include the interaction with all levels of staff by the PREA Coordinator and with the inmate population showed that the PREA Coordinator is keenly involved with the overall operations of the jail. the auditor requested minor updates to the policy pertaining to standards 115.16, 115.32, 115.33, 115.35, 115.54, 115.76, and 115.81. Changes were made and sent to the auditor. The updated policy language is noted throughout this report. The auditor finds sufficient evidence to support a finding of compliance.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· PAQ
	· Interview with the PREA Coordinator
	· Interview with the Superintendent
	Summary of evidence to support a finding of compliance:
	The PAQ indicates there are no contracts during the PREA audit cycle for confinement of inmates. This was confirmed with the interviews with the PREA Coordinator and Superintendent. The auditor found no reason to dispute that they contract for the confinement of inmates during the audit process. Therefore, this standard is not applicable – compliant.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA Worcester County Sheriff's Office
- WCSO PREA Staffing Review 2021, 2022
- Interview with the Superintendent
- · Interview with the PREA Coordinator
- Interview with the PCM
- · Randomly requested staffing rosters
- · Interviews with supervisors (watch commander and captain)
- · Review of electronic documentation of rounds pre audit June 2022, April 2022 (all shifts)
- Random staff interviews
- PAQ

The PAQ indicates that the average daily population since the last PREA audit is 574. The staffing plan is predicated on an inmate population of 1253.

Policy - PREA Worcester County Sheriff's Office

The WCSO shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, the WCSO shall take into consideration: (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility's physical plant (including "blind-spots" or areas August 2022 WCSO PREA - 22 where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. (b) In circumstances where the staffing plan is not complied with, the WCSO shall document and justify all deviations from the plan. (c) Whenever necessary, but no less frequently than once each year, in consultation with the PREA coordinator required by § 115.11, the WCSO shall assess, determine, and document whether adjustments are needed to: (1) The staffing plan established pursuant to paragraph (a) of this section; (2) The WCSO's deployment of video monitoring systems and other monitoring technologies; and (3) The resources the WCSO has available to commit to ensure adherence to the staffing

In addition to a vulnerability assessment of the Jail and HOC, the Superintendent or designee, shall conduct an annual PREA assessment which will consist of staff and inmate interviews to determine how operational practice can be improved upon.

Assistant Deputy Superintendents, Captains, Lieutenants and Sergeants shall make unannounced rounds to identify and deter sexual misconduct and sexual abuse. Unannounced rounds will occur on all three shifts. (PREA §115.13(d)) It is the policy of WCSO that staff are prohibited from alerting other staff members that supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

- (a) The interview with the Superintendent and review of the staffing plan confirmed the following:
- (1) The facility has been maintaining accreditation status through the American Correctional Association (ACA) and currently, National Commission on Correctional health (NCCHC).
- (2) There are no judicial findings of inadequacy;
- (3) There are no findings of inadequacy from Federal investigative agencies;
- (4) There are no findings of inadequacy from internal or external oversight bodies; The auditor was informed that the

Massachusetts Department of Correction conducts audits twice yearly to analyze and assess operations. The Superintendent confirmed that no deficiencies have been noted requiring a change in operations.

- (5) All components of the facility's physical plant are reviewed. Video monitoring is used; specific information regarding placement of cameras was reviewed during the audit.
- (6) The composition of the inmate population has been the same for several years. However, staff indicated that the trend is towards a decrease in sentenced inmates and an increase in pre-trial offenders.
- (7) The number and placement of supervisory staff has been reviewed and determined to be adequate. Review of rounds and staffing occur regularly.
- (8) Institution programs occurring on a particular shift has a detailed evaluation of the time and days of the programs occurring. The auditor inquired about staffing in the program building which has evening programming and found that it is supported in the staffing plan.
- (9) Any applicable State or local laws, regulations, or standards are reviewed. Staff discussed with the auditor that changes that were implemented with the 2018 Crime Reform Act that affected restrictive housing, medication administration for substance abusers, treatment/ searches of transgenders and other areas.
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse are addressed. This is additionally analyzed in the Annual Report.
- (11) No other relevant factors have been identified.
- (b) The facility indicated on the PAQ that there have been no instances of non-compliance as overtime is utilized to ensure all positions are filled. Staffing rosters were requested for the 6th day of the previous six months. It was reported and confirmed through review of randomly requested staffing rosters that overtime is used to ensure that all positions are filled. Random staff interviews confirmed that they work overtime and are from time to time mandated to work overtime to ensure staff positions are filled. During the audit, the auditor observed that the facility has no obvious blind spots, staff were assigned to posts, staff stations provide direct supervision of the housing unit, camera coverage is excellent. The physical plant has remained the same. Additionally, the facility provided a list of camera locations for the auditor to use as reference during the onsite audit.

The Staffing plan established an optimum staffing level based on PREA and a minimum level. Observations during each shift confirmed that optimum staffing was met in most areas. The minimum staffing was viewed one time. Informal conversations with staff confirmed that the majority of the time the optimum staffing level is met.

- (c) Policy, interviews with the Superintendent and the PREA Coordinator confirmed this staffing review is conducted. Review of the staffing plan confirmed that video monitoring, number and placement of supervisors, prevalence of substantiated and unsubstantiated incidents of sexual abuse, and resources are reviewed annually. No changes were implemented, the auditor supports that the analysis was credible to conclude this.
- (d) Electronic logbooks entries were provided with the pre-audit documentation. The auditor asked staff during random interviews if the supervisor comes through the unit regularly, if the time was the same every day and if anyone is alerting them to the rounds being conducted by the supervisor. All interviews confirmed that they do not know when the supervisor is coming to their assigned post for the check, and they are not being alerted to the supervisor making rounds. Additionally, they confirmed knowledge that they are not to alert others when the supervisor is making rounds. Formal and informal interviews with supervisory staff confirmed to the auditor that they conduct rounds at different times, different directions and do not believe that staff have been alerted to their rounds. The auditor randomly requested and reviewed video footage demonstrating unannounced rounds for March 1, 2022, providing further evidence of compliance with this provision.

Summary of evidence to support a finding of compliance:

Review of the policies, staffing plan, and random selection of rosters provided evidence which supports compliance. Interviews with staff such as corrections officers, supervisors, Superintendent and PREA Coordinator all supported a finding of compliance. Randomly requested video footage of unannounced rounds, and overall observations during the audit process did not lead to any evidence that would indicate non-compliance; it provided strong evidence to the auditor to support a finding of compliance.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	Part I, Title XVII, Chapter 119 and Section 58
	· Interview youngest inmate
	(a)(b)(c)
	Part I, Title XVII, Chapter 119 and Section 58 effective September 2013 requires offenders under the age of 18 to be confined to the Department of Youth Services, this is referred to as the Raise the Age Bill. During the audit, neither auditor saw nor heard anything to dispute that no youths are housed at this facility. The auditor requested to interview the youngest inmate; he confirmed his birthday (along with records) and confirmed that he came to the jail two months after turning 18 years old.
	Summary of evidence to support a finding of compliance: The law prevents the facility from housing inmates under the age of 18 yrs. Old. Observations and the interview with the youngest inmate confirmed this to be true and therefore it is deemed not applicable – compliant.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA Worcester County Sheriff's Office
- Policy 924.06 Search Policy
- · Training Curriculum PREA Academy, In-service, Orientation
- Training Records
- · Electronic logbook entries noting "PREA Announcement"
- Checklist for New Transgender Inmates
- Interviews with random staff
- Interviews with random inmates
- · Interviews with targeted category inmates
- Interviews with female security staff
- · Interview with the training coordinator
- Observations
- · Review of video monitoring
- · PAQ
- · Frequently Asked Questions Clarification of Application to PREA Standards Provisions (FAQ)

The PAQ indicates that there has been no cross-gender strip or cross-gender visual body cavity searches of inmates, no cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff. In accordance with the 2018 Crime Reform Act, a transgender/intersex inmate can request a search by staff of their gender identification. The PAQ reports that 100% of security staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner, consistent with security needs.

The following policy excerpts support compliance with the provisions of this standard:

Policy - PREA Searches 1. The Department shall not conduct cross-gender strip searches or cross gender body cavity searches except in exigent circumstances or when performed by medical practitioners. (PREA §115.15(a) and WCSO 924.06 - Searches) 2. The Department shall not conduct cross-gender pat down searches except in exigent circumstances. (WCSO 924.06 - Searches) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates. (PREA §115.15) 3. Inmates shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks. (Staff monitoring via the camera system shall ensure that this is enforced.) (PREA §115.15 (d) and WCSO 924.06 - Searches) 4. Transgender or intersex inmates shall have the option of choosing to be strip searched by staff members of either gender. (WCSO 924.06 - Searches) The Department shall not physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status unless it is done as part of a broader medical examination conducted in private by a medical practitioner. (PREA §115.15 (e) and WCSO 924.06 - Searches) unit staff are required to announce the presence of the opposite gender prior to entering the unit, whenever such entry changes the status quo of the gender of staff on duty, in that area. The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. (PREA §115.15 (f) and WCSO - 924.06 Searches)

Policy 924.06 Search Policy

Searches 1. The Department shall not conduct cross-gender strip searches or cross gender body cavity searches except in exigent circumstances or when performed by medical practitioners. (PREA §115.15(a) and WCSO 924.06 - Searches) 2.

The Department shall not conduct cross-gender pat down searches except in exigent circumstances. (WCSO 924.06 - Searches) The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches, and shall document all cross-gender pat-down searches of female inmates. (PREA §115.15) 3. Inmates shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia except in exigent circumstances or when such viewing is incidental to routine cell checks. (Staff monitoring via the camera system shall ensure that this is enforced.) (PREA §115.15 (d) and WCSO 924.06 - Searches) 4. Transgender or intersex inmates shall have the option of choosing to be strip searched by staff members of either gender. (WCSO 924.06 - Searches) The Department shall not physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status unless it is done as part of a broader medical examination conducted in private by a medical practitioner. (PREA §115.15 (e) and WCSO 924.06 - Searches)

Strip Searches a. Strip Searches of inmates are to be conducted in relative privacy with as much dignity as possible by security personnel of the same sex as the inmate, except in an emergency. b. The agency shall train security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. c. These searches may be employed in, but not limited to, the following situations: 1) Admission to the Facility; 2) Entrance or exit into a secure area, especially inmates from M-5, Annex and/or Work Release entering the Main Jail for a medical appointment, involvement in a program or other reason; 3)Transportation to and from court, medical trips or visits; 4) Alleged disciplinary infraction; 5) Inmate believed to be in possession of contraband; 6) After an escape or escape attempt; 7) Placement into Special Management; 8) Prior to and following contact visits; 9) Return from temporary release (furlough, work release, community service program, etc.); or 10) Placement onto a Mental Health Status.

Search techniques shall be as follows: 1) Strip searches of inmates will be conducted in relative privacy by two security personnel of the same sex as the inmate being searched. Strip searches by members of the opposite sex shall not be permitted except under emergency situations. 2) In locations such as Work Release and the Annex where staffing does not allow two officers to participate in the strip search, the officer performing the search will utilize a room where a camera is placed to record the search process. These cameras will be taped and only accessible by the Director of IT. f. Transgender or intersex inmates 1) Transgender or intersex inmates shall have the option of choosing to be strip searched by staff members of either gender. All strip searches will be documented in OMS listing both officers performing the search. 2) The facility shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner. 3) The inmate to be searched shall be given verbal instructions so as to ease and expedite the situation

Cross gender pat searches shall be conducted in relative privacy with as much dignity as possible; however, the facility shall not permit cross-gender patdown searches of female inmates, absent exigent circumstances.

Procedures for the use of the SecurPass Body Scanner: 1) Only staff that has been properly trained shall operate the body scanner equipment. 2) A visual inspection of the body scanner equipment shall be conducted each day. If anything is unusual with the machine, a report will be entered into OMS. 3) NO PREGNANT FEMALES ARE ALLOWED NEAR THIS MACHINE OR ARE TO BE SCANNED. INMATES WHO HAVE RECENTLY HAD CHEMOTHERAPY/ RADIATION TREATMENT OR HAS A PACEMAKER CANNOT GO THROUGH THE BODY SCAN MACHINE. 4) A Scan Activity Report will be generated utilizing (SIM) – Body Scanner Image Management Software. The report can be reviewed by the Receiving Supervisor as needed. 5) Any problems, damage or malfunction to the equipment shall be reported immediately through the chain of command by an Incident Report in OMS. 6) There shall be two officers assigned to the body scan machine while in use. One officer shall be assigned as the operator who controls the terminal and one officer shall be assigned as the scanner giving instructions at the front of the machine. Both officers shall be of the same sex as the inmate/ detainee being scanned.

Body Cavity Search a. There will be no intrusive body cavity searches performed for security purposes. Intrusive body cavity searches shall be conducted only when the following have occurred: 1) Probable cause has been determined by staff through reasonable belief that the inmate is carrying contraband or other prohibited material; 2) Authorization has been given by the Sheriff; or 3) A search warrant has been obtained. b. The body cavity search shall be done by qualified health care personnel or correctional personnel thoroughly trained by health care personnel and shall be conducted in private. c. Under no circumstances may a correction officer extend a search into a body cavity unless the inmate's health is in serious danger (i.e. choking) and in this case, all related information must be documented on an incident report and submitted to the staff member's supervisor via OMS prior to the end of tour of duty. In the event of this type of search, the inmate shall be subsequently directed to the Medical Department for a follow up examination. d. If an officer suspects contraband in the anal cavity, or other body cavity, the officer will request the inmate to remove such material from their person. e. If the inmate refuses to remove, cannot remove, or is hesitant to remove the suspected contraband, the officer shall call a member of the facility medical staff to view the inmate. f. It shall be the decision of the medical staff member to either recommend to the officer in charge that the inmate be isolated in a dry room until the contraband is eliminated naturally; or, if the inmate's health or wellbeing is considered to be at risk, to remove the suspected contraband or arrange for the inmate to be transported to an outside medical facility for further examination and treatment.

- (a) As indicated, policy restricts cross-gender strip searches or cross-gender visual body cavity searches except if there are exigent circumstances. This includes cross-gender searches of female inmates/detainees. The auditor observed several female officers during the onsite tour which led her to conclude that there would not be an exigent circumstance due to staffing that would require cross gender searches. This included a female officer assigned to intake during first and second shifts. However, the auditor learned and found credible that unless placed at the facility for holding, female inmates are not housed at this facility. This occurrence is rare.
- (b) During the onsite audit, there were no females held. The auditor viewed the area where they would be detained and found that it afforded appropriate privacy.
- (c) Policy requires that cross-gender searches be documented. It was reported that no cross-gender searches have been conducted; therefore, there was no documentation to review to confirm this. Transgender/intersex inmates, in accordance with the Crime Reform Act of 2018 (state law) allows those who identify as transgender or intersex to select the gender of who will pat search and strip search them. The auditor informally discussed this with three female staff and transgender inmates and confirmed that this is being completed as required, and all parties described the process as respectful and professionally. Checklist for new Transgender/intersex inmates supports this process.
- (d) The auditor was provided documentation that reflected that cross-gender announcements are documented in the electronic logbook as the "PREA Announcement". All random staff interviews and random inmate interviews confirmed that this announcement is made every time a female staff enters the unit and, that inmates are able to shower, use the toilet and change clothes without being seen in using the toilet, showering, or changing clothes. The auditor heard the announcement when entering all housing units and additionally when other female staff entered the housing units. The announcement is made on a public address system, where it was determined by the auditor, all inmates can hear the announcement.

During the tour, the auditor observed the showers located in the individual housing units. For the housing units with individual rooms, the showers have doors to provide privacy but maintain a view to ensure safety (head and feet). They are located in an area where the officer's station can easily observe if one inmate is trying to harass another inmate while showering. Toilets and sinks are located in the cells at an angle from the window, again giving the officer the ability to ensure safety but not have to directly view the inmate while using these facilities. Toilets, urinals and showers in housing units where there is dormitory housing provide a common area in which either the entrance to the bathroom is covered by a curtain or the individual shower areas are covered by a curtain. Additionally, during the tour the auditor observed the area where strip searches are conducted in Intake. It provided appropriate privacy for the inmate during this process. Visiting is non-contact and therefore it does not require a strip search. During the tour, the auditor and escort team was announced prior to entering the unit; this did not appear to be odd based on the observations of the inmates in the unit at the time. The view of the monitoring supports that opposite gender staff cannot view buttocks, or genitalia; they do not show views of the cells, bathroom or showers.

- (e) As stated in the policies, transgender or intersex offenders are not searched or physically examined to determine genital status. All staff interviews supported that they were knowledgeable regarding this requirement of the standard, and this has not occurred at this facility. The interview with the transgender inmates supported compliance with this provision. The training curriculum reinforces this requirement.
- (f) The auditor reviewed the training curriculum for searches; it is a brief video on how male and female searches/transgender searches are to be conducted, entitled Guidance on Cross and Transgender Pat Searches and a power point presentation. It addresses when searches are to be conducted, searches of transgender/intersex inmates are to be professional, respectful and in the least intrusive manner possible, consistent with security needs, techniques for conducting cross-gender searches, noting a second officer should be present, re-emphasis of not conducting cross-gender pat searches unless there is an exigent circumstance, a female officer searching a male inmate, and a male officer searching a female inmate. Policy regarding transgender/intersex inmate searches supports compliance with the FAQ issued December 2016 which indicates clarification for searches of transgender/intersex inmates. Training records were provided demonstrating that security staff have been trained in the updated curriculum implemented by state law in 2018. Additionally, per the interview with the training coordinator, this is provided in new officer orientation and refresher training.

Training records provided demonstrate that staff have received this training in 2021/2022. All staff interviews support attendance at the training, knowledge and compliance of the techniques provided in training.

Random staff interviews confirmed to the auditor that they received this training and provided information acknowledging there is a different technique to use for cross gender/transgender searches.

The interview with the Training Coordinator confirmed that search training is conducted annually for security staff. Female staff assured the auditor that they have been appropriately training to conduct pat search and strip searches of transgender female inmates who request to be searched by a female.

Summary of evidence to support a finding of compliance:

Policies which support compliance, staff interviews which demonstrated knowledge of these requirements from training received, the training curriculum, training records, and overall observations made during the audit process provide ample evidence to support a finding of compliance. In accordance with FAQ clarifications, policy was updated to allow a transgender/intersex inmate to designate the gender of the staff to pat search in accordance with the inmate's gender identification. Interviews all confirmed that they have been appropriately trained regarding how to search transgender/intersex persons and cross-gender pat searches. Inmate interviews confirmed that they can shower, use the toilet and change clothes without being viewed by opposite gender staff. The auditor is finding this facility is compliant with this standard.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · PREA Response Plan for Sexual Assault
- Policy 934.03 Special Accommodations for Inmates
- Observations during the tour
- · Interview with the Sheriff
- · Interviews Inmates LEP or disabled
- Random staff interviews
- · PAQ
- · Language Interpretation services contract
- · Records/invoices demonstrating use of the service (May 2022)
- PREA training curriculum reinforces education in formats accessible to all inmates
- · Inmate Handbook English and Spanish
- Demonstration Inmate Orientation

The following policy excerpt supports compliance with this standard:

Policy - PREA states, The WCSO shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the WCSO's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the WCSO shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The WCSO is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CFR 35.164. 4. The WCSO shall take reasonable steps to ensure meaningful access to all aspects of the WCSO's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. 5. The WCSO shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under § 115.64, or the investigation of the inmate's allegations

Policy 934.03 Special Accommodations for Inmates

Inmates with hearing and or speech disabilities, and inmates who wish to communicate with parties who have such disabilities, shall be afforded access to a TeleTYpe (TTY), telephone with volume control, or tablets. Such access shall be coordinated with an Inmate Support Counselor. E. Any inmate claiming a special need due to a physical or mental state, that amounts to a limitation or impairment in everyday activities, whether claimed as a disability under the Americans with Disabilities Act or not, should be considered for reasonable accommodations for the limitation or impairment.

(a)(b) There is a contract for Language interpretation services. During random staff interviews, many staff are aware of the availability of the language line services which can be used, if needed. This was relayed to the auditor during random staff interviews. The auditor was provided the Inmate Handbook which is available in English Spanish. Posters throughout the facility were provided in both English and Spanish. Inmates interviewed whose primary language was Spanish all indicated to

the auditor that they received the guidebook in English and Spanish, as per their request. The assistance of the Language line was used to conduct one interview with a limited English inmate. Inmates with physical disabilities confirmed to the auditor they are very aware of their rights under this law and have no concerns regarding sexual abuse or sexual harassment, or fear of related to their physical limitations.

The interview with the Sheriff demonstrated a strong support for ensuring all inmates with disabilities or limited English proficiency 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.

(c) The PAQ reports that there have been no instances where an inmate was used to interpret during a PREA investigation in the previous 12 months. The auditor found no reason to dispute this fact during the audit process. All staff interviews confirmed that another inmate would not be used to interpret for an inmate making a PREA allegation or any part of the PREA requirements (intake, investigation, etc).

PREA Response Plan for Sexual Assault states If the inmate does not speak English, the WCSO Medical and Security Staff shall make arrangements for interpreter services (Language Line phone number is in Dispatch) prior to, but without delaying, transportation of the inmate to the hospital.

Staff training includes the following:

Can an Inmate Provide Interpretation?

- Yes, but only if the person requiring interpretation is in danger or otherwise in immediate need of assistance.
- · If you ask an inmate to interpret fill out an incident report explaining why
- Once the danger has passed, as a supervisor to help you arrange for an interpreter who is not an inmate

Random staff interviews supported that they would not use another inmate to interpret.

Summary of evidence to support a finding of compliance: Policy supports the requirements of the standard. Random staff interviews, the PREA Coordinator interview, and the interview with the Sheriff support that inmates with disabilities and limited English inmates will be provided the resources to ensure they have equal participation and benefits from the requirements of this standard. Contracts with a language line service, demonstration of and use of the language line service, interviews with limited English and inmates with physical limitations, availability of information throughout the institution in English and Spanish, availability of bi-lingual staff, review of the training curriculum all provided ample evidence for the auditor to support a finding of compliance with the requirements of this standard.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Policy 914.02 Selection and Hiring
- Policy 914.10 Standards of Conduct
- Observations
- · Interview Director of Human Resources
- · Employment Application
- Documents Personnel files of those hired and promoted in the past 12 months
- · Documentation randomly requested staff confirmation of background checks
- Employee Handbook
- · PAQ
- Contractor personnel files/background checks
- · Interview with staff hired within the last 12 months

The PAQ indicates that one hundred twenty-one (121) staff have been hired who may have contact with inmates in the previous twelve months. There were twenty-four (24) contractual staff hired within the previous 12 months who may have contact with inmates.

Policy - PREA states, the Department shall consider any incident 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. (PREA §115.17 (b) (1)) 2. The Department shall conduct thorough background investigations on all potential staff and shall not hire anyone who was engaged in sexual abuse in a correctional environment, who has been convicted of engaging in or attempting to engage in sexual activity facilitated by force or who has been civilly or administratively adjudicated in these types of activities. (PREA §115.17 (a)(1) and WCSO 914.02- Hiring / Selection) The Department shall conduct criminal background record checks at least every five years for current employees and contractors who may have contact with inmates. (PREA §115.17 (e) (1))

Policy 914.02 Selection and Hiring

Hiring 1. Correction Officers a. A criminal record investigation shall be conducted consisting of a warrant and Board of Probation check (see applicable CMR) before the physical examination. A more extensive background investigation may be conducted as needed.

Non-Correction/Non-Law Enforcement Positions a. Upon recommendation from the Screening Committee the applicant shall be interviewed by the Superintendent/Special Sheriff or designee and apprised of the basic physical examination requirements for the position. b. The applicant is given a Personal History Statement questionnaire which must be completed and submitted on the day of the scheduled physical examination. This questionnaire contains information regarding:

Personal History · Family History · Residences · Work History · Military Background August 2021 914.02 - 7 · Education · References c. The applicant is scheduled for a basic physical examination to be conducted by Health Services. The applicant must successfully complete the basic physical examination to perform the duties of the position. d. A criminal record investigation shall be conducted consisting of a warrant and Board of Probation check (see applicable CMR). A more extensive background investigation may be conducted as needed.

Policy 914.10 Standards of Conduct

Employees are required to immediately notify their supervisor of any interaction with an outside law enforcement agency. If an employee is arrested and/or charged with a criminal offense by the Commonwealth of Massachusetts or by a law enforcement agency, the employee shall notify their respective Assistant Deputy Superintendent within 24-hours or at the start of their next scheduled shift (if within 24-hours of arrest) or filing of criminal charge(s). Employees must also notify their supervisor if a restraining order has been issued against them, their right to possess a firearm has been suspended/ revoked or if their driver's license has been suspended/ revoked. The Assistant Deputy Superintendent shall then file a report with the

Assistant Deputy Superintendent of Special Services.

- (a) The auditor reviewed the application process. The application process specifically asks all applicants to answer the questions (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity. The interview with the HR Manager confirmed this requirement for newly hired and promotional staff.
- (b) Policy supports the requirement of the standard. The application process supports that potential candidates and promotional staff are asked about prior incidents of sexual harassment. Interview with the Director of Human Resource indicates that they had not had a candidate with a history of sexual harassment which required consideration.
- (c) Criminal background checks include the following: employment history, answers to the questions noted in provision (a) and (b), reference checks, background checks (which includes the following: State Police, NCIC, QH (capture out of state activity) Massachusetts Board of Probation and Registry of Motor Vehicles). Documentation of this check was provided to the auditor for four newly hired staff personnel files which the auditor reviewed. Additionally, reference checks were documented; none reviewed had prior institutional experience. The auditor inquired about staff who may have applied with prior institutional experience and no examples of such were revealed.
- (d) Two contractual staff personnel files were reviewed, one for Advocates, Inc. and one for Wellpath, which had evidence of the background check. The interview with the Director of Human Resources confirmed that a background check is conducted on all contractual employees.
- (e) The auditor requested and reviewed fifteen personnel files employee with the last name of D, M and T (five each), two contractual files and two personnel files of recently promoted staff person which demonstrated a background check and acknowledgment of answering the required questions in provision (a) and (b).
- (f) As stated, this is included in the application process on the applicant forms. It was confirmed to the auditor that promotional candidates complete a form requesting the information in provision (a) and provision (b); therefore, addressing these questions again. Policy 914.10 Standards of Conduct reinforces that staff have a duty report any arrest or interaction with outside law enforcement. The auditor randomly asked staff during their interviews (six total) if they were aware of these requirements; those asked immediately responded acknowledging their awareness of this.
- (g) The application has the candidate sign acknowledging: "I hereby affirm that I have read and understand this application and that the information that I have provided on this application (and accompanying resume, if any) is true and complete to the best of my knowledge. I understand that any omission or falsified information shall subject me to disqualification from further consideration for employment and will be considered justification for my immediate dismissal if discovered at a later date"
- (h) Per the interview with the Human Resources, their office has not had to provide information to another agency about a prior employee. Upon receipt of a release of records, she indicated this information would be provided.

Summary of evidence to support a finding of compliance: Policies, interviews with the PREA Coordinator, Director of Human Resource, and review of documentation from personnel files all provided the auditor with consistent information to support that the provisions of the standard are in policy, and policy is followed.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Interviews Sheriff
	· Interview Superintendent
	· Observations
	· PAQ
	The PAQ indicates the facility has not acquired any new facilities but has made substantial expansions or modifications of existing facilities since the last PREA audit and has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.
	(a,b) The auditor observed during the tour of the facility that has modified their medical building, intake processing, and lock up facilities. Camera monitoring was added to these areas. Review of the new operations and the video monitoring for these operations supported that they ensured good visibility, yet maintained privacy for areas where inmates may undress, shower or use the toilet.
	Summary of evidence to support a finding of compliance: The interview with the Sheriff supports that sexual abuse and sexual harassment prevention was considered when making changes to the physical plant and upgrading the camera system. Observations of the physical plant changes and monitoring confirmed this to the auditor. Therefore, the auditor found sufficient evidence to support a finding of compliance.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Response Plan for Sexual Assault
- PAQ
- · Interview with the Investigator
- · Investigator Training curriculum uniform evidence protocol and source
- · Interview with Regional SANE Coordinator for Commonwealth of Massachusetts
- PREA Kit
- MOU with Pathways for Change/Interview with Program Manager for Pathways
- · Massachusetts State Police website
- Inmate Handbook

The PAQ indicates there has been one forensic medical exam, no SANE/SAFE exams, one exam performed by a qualified medical practitioner during the previous twelve months.

Policy - PREA states,

The Special Services Division will investigate all allegations of sexual abuse and sexual harassment, including third party reports of sexual abuse and sexual harassment. These investigations shall be conducted promptly, thoroughly and objectively by a PREA trained investigator following U.S. Department of Justice, Office on Violence Against Women National Protocol for Sexual Assault Medical Forensic Examinations, 2d (April 2013).

The Department will attempt to maintain a memorandum of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse.

All services provided to an alleged victim shall be done at no cost to the alleged victim, regardless of whether they cooperate with the investigation or name their alleged abuser.

WCSD Response Plan for Sexual Assault

In the event that an inmate reports being a victim of a sexually abusive behavior, the staff person receiving such complaint shall secure the crime scene and immediately notify the Senior Shift Officer. Sexually abusive behavior includes acts of intimacy, sexual contact, sexual abuse and staff sexual misconduct. 2. The staff person receiving such complaint shall file a confidential incident report in OMS as soon as possible but before the end of their shift. 3. The Senior Shift Officer shall utilize the Inmate Sexual Assault Checklist (Attachment 1) and the Notification List (Attachment 2) and ensure the following steps are taken: a. Notify the PREA Incident team by email: PREAALERT@sdw.state.ma.us b. Notify the Assistant Superintendent of Operations and the Assistant Deputy Superintendent of Special Services immediately via email and phone. c. The Special Services Investigators/ Sexual Assault Investigators shall be notified immediately. Once Investigators are assigned to the case, the investigator will notify the Senior Shift Officer (SSO) of how the investigation will begin. If during non-business hours, the Assistant Deputy Superintendent of Special Services shall be called. Dispatch shall use the on call list that is posted in Special Services for the evening and weekend coverage. Once Special Services Investigators arrive on scene, they will be responsible for taking control of the crime scene and initiating an investigation of the alleged assault. d. The inmate victim shall immediately be taken to the Health Services Unit for emergency medical care and a mental health assessment (if Mental Health staff is not available, medical will do the assessment.) The victim will be provided unimpeded access to emergency medical treatment and crisis intervention through Pathways for Change at the 24-hour confidential hotline. The number is 1-800- 870-5905. e. Assign a Housing Unit Officer to ensure control of the area and to prevent unauthorized personnel from entering. f. The victim shall be requested not to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. g. Under no circumstances shall the perpetrator be allowed to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. h. A medical staff member shall evaluate and document the extent of the physical injury and provide emergency treatment as needed. i. A determination of possible referral to an outside hospital with a rape crisis unit shall be made by the operation captain in conjunction with medical staff. j. If the determination is made that the inmate should be sent to an outside hospital and the inmate victim consents, the alleged victim shall meet with a Sexual Assault Nurse Examiner (SANE) where he will receive preventative treatment

Inmate Handbook VICTIM SUPPORT SERVICES The Worcester County Sheriff's Office partnered with Pathways for Change (former Rape Crisis Center) to provide survivors of sexual abuse with emotional support services. To access these services, contact: 1-800-870-5905, or write: 588 Main Street, Worcester, MA 01608 The Pathways 24-hour Hotline is free, confidential, unmonitored and unrecorded.

The interview with the SANE Coordinator for the Commonwealth of Massachusetts confirmed that there are SANE certified hospitals throughout the state. All efforts will be made to include sending a SANE certified nurse to a hospital site when needed. She indicated they have been successful with providing this level of exam for several years. Communication with the Pathways for Change verified to the auditor that this organization, which is the recognized rape crisis center serving Worcester County, would provide a trained victim advocate to provide support during the forensic exam, investigatory interviews and court proceedings, crisis intervention, emotional support services and any other relevant referrals. Request for an advocate is automatically addressed by the hospital and also addressed in the Worcester County PREA Policy and Response Plan.

Response Plan for Sexual Assault

COLLECTION OF EVIDENCE 1. All evidence should be collected by the Special Services Investigator assigned to the case. PREA bag will be utilized with each case. 2. Chain of Evidence Form will be used. 3. Evidence from the inmate victim shall be collected in accordance with the WCSO PREA Policy by the Special Services Investigator. a. Place a clean white sheet on the floor in a secure area, b. Instruct the inmate to step into the center of the sheet and remove all clothing, including underwear, socks, shoes, etc., without shaking them. c. The sheet should then be folded around the clothes in such a way as to maintain any forensic evidence. d. Place the inmate in clean clothing and transport to the Health Services Unit for medical care/mental health referral. 4. Evidence collected shall be placed in a large brown paper bag, properly marked with the following, date, time, inmate number, and a description of all the articles in the bag. (Ensure a chain of custody form is completed.) August 2021 WSCO - PREA Response Plan - 4 5. Once medical/mental health staff has evaluated the victim, he will be placed in a dry cell until cleared by the sexual assault investigator. If medical staff determines that emergency medical care is needed, the inmate will be transported immediately. 6. The bag, along with any evidence collected at the facility and at any hospital (i.e. Rape Kit) shall then be immediately turned over to the Certified Sexual Assault Investigator, or Special Services Investigator. If a Special Services Investigator is not available, secure all items in the Evidence Lockers in Dispatch. 7. The evidence will then be transported to the State Police Laboratory, #59 Horse Pond Road Sudbury, MA 01776, as soon as possible. Evidence retained in excess of twenty four (24) hours (weekends/holidays) must be properly refrigerated, ensuring a proper chain of custody form. 8. The inmate will be placed in clean clothing from the property department and transported to hospital that has a SANE nurse available. The escort shall consist of at least one Special Services Investigator, when possible.

(a,b)To assist with ensuring that a uniform evidence protocol is used, the facility maintains a PREA Response Kit and checklist of contents. The facility maintains a copy of the National Protocol for Sexual Assault Medical Forensic Examinations. Investigators were trained in conjunction with the Massachusetts Department of Correction Sexual Assault Investigation Training. Evidence Protocol and Forensic Medical Examinations are based on the Sexual Assault Investigator Certification Curriculum, Municipal Police Training Committee.

The Massachusetts State Police addresses evidence and processes it at the State Police Crime Lab. The auditor found on the website the following: Furthermore, the Massachusetts State Police website states, The Massachusetts State Police (MSP) has a zero-tolerance policy toward sexual abuse and sexual harassment of any kind towards any detainee while in State Police custody. All detainees have equal rights to safety, dignity, and justice and have the right to be free from sexual abuse and sexual harassment. Lock up facilities under their supervision have been certified compliant with PREA which further reinforces compliance with the standard.

(c) (d) Policy supports that all victims of sexual abuse will be offered a forensic exam with no cost to the victim. The interview and research on the internet further support that this state has a statewide organized system for ensuring that SANE exams are available for all who need them. The interview with the SANE Coordinator for the Commonwealth of Massachusetts confirmed that there are SANE certified hospitals throughout the state. All efforts will be made to include sending a SANE certified nurse to a site when needed. She indicated they have been successful with providing this level of exam for several years. Request for an advocate is automatically addressed by the hospital. However, the MOU with the Pathways for Change, which also provides emotional support services to all inmates, confirmed that it will provide victim services to inmates/residents who are transported to the local hospital. Massachusetts Rape Crisis Programs support that these programs are funded in part by the Massachusetts Department of Public Health. They offer free, confidential services for adolescent and adult survivors provide trained rape crisis counselors at all local rape crisis program. This includes a 24/7 hotline counseling, information and referrals, meeting with sexual assault survivors 24/7 at a hospital or police station, accompany the sexual assault survivor to court, provide individual counseling, education, professional training and outreach. There are sixteen rape crisis center and one statewide hotline in Massachusetts. This publication is dated 2015. The

Pathways for Chane is listed as one of the sixteen centers.

(f) As indicated to the auditor in interviews and policy, if the Massachusetts State Police becomes involved, they will provide both a qualified victim advocate, if requested, and ensure a SANE exam is conducted. The auditor finds this credible based on the PREA certifications of the Lockup facilities, operated by the State Police.

Summary of evidence to support a finding of compliance:

Policy excerpts, review of investigations, investigator training, Massachusetts State Police website and interviews with the investigator, and PREA Compliance Manager support compliance. A PREA kit is available to help process evidence appropriately. Staff interviews supported that staff were aware of the requirements and actions needed to preserve evidence. The Regional SANE Coordinator confirmed that SANE exams are available to this population. The policy is posted on the agency website. The MOU with Pathways for Change confirms that this organization will provide a rape crisis counselor at a local Worcester Hospital when a sexual assault case has been alleged. The interview with a Program Manager for this organization confirmed these services are provided as requested by the facility and the hospital. Therefore, the auditor finds that there is sufficient evidence to support a finding of compliance.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- MOU with Pathways for Change
- · Interviews Sheriff
- Interviews Investigative staff
- Documentation of investigations
- · Worcester County Sheriff's Office website
- PAQ

The PAQ indicates there have been thirty-one (31) allegations resulting in administrative investigations, one allegation referred for criminal investigation in the past 12 months.

Policy - PREA states, the Special Services Division will investigate all allegations of sexual abuse and sexual harassment, including third party reports of sexual abuse and sexual harassment. These investigations shall be conducted promptly, thoroughly and objectively by a PREA trained investigator following U.S. Department of Justice, Office on Violence Against Women National Protocol for Sexual Assault Medical Forensic Examinations, 2d (April 2013)

WCSO Response Plan for Sexual Assault: In the event that an inmate reports being a victim of a sexually abusive behavior, the staff person receiving such complaint shall secure the crime scene and immediately notify the Senior Shift Officer. Sexually abusive behavior includes acts of intimacy, sexual contact, sexual abuse and staff sexual misconduct. 2. The staff person receiving such complaint shall file a confidential incident report in OMS as soon as possible but before the end of their shift. 3. The Senior Shift Officer shall utilize the Inmate Sexual Assault Checklist (Attachment 1) and the Notification List (Attachment 2) and ensure the following steps are taken: a. Notify the PREA Incident team by email: PREAALERT@sdw.state.ma.us b. Notify the Assistant Superintendent of Operations and the Assistant Deputy Superintendent of Special Services immediately via email and phone. c. The Special Services Investigators/ Sexual Assault Investigators shall be notified immediately. Once Investigators are assigned to the case, the investigator will notify the Senior Shift Officer (SSO) of how the investigation will begin. If during non-business hours, the Assistant Deputy Superintendent of Special Services shall be called. Dispatch shall use the on call list that is posted in Special Services for the evening and weekend coverage. Once Special Services Investigators arrive on scene, they will be responsible for taking control of the crime scene and initiating an investigation of the alleged assault. d. The inmate victim shall immediately be taken to the Health Services Unit for emergency medical care and a mental health assessment (if Mental Health staff is not available, medical will do the assessment.) The victim will be provided unimpeded access to emergency medical treatment and crisis intervention through Pathways for Change at the 24-hour confidential hotline. The number is 1-800-870-5905. e. Assign a Housing Unit Officer to ensure control of the area and to prevent unauthorized personnel from entering. f. The victim shall be requested not to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. g. Under no circumstances shall the perpetrator be allowed to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. h. A medical staff member shall evaluate and document the extent of the physical injury and provide emergency treatment as needed. i. A determination of possible referral to an outside hospital with a rape crisis unit shall be made by the operation captain in conjunction with medical staff. j. If the determination is made that the inmate should be sent to an outside hospital and the inmate victim consents, the alleged victim shall meet with a Sexual Assault Nurse Examiner (SANE) where he will receive preventative treatment.

The interview with the Sheriff assured the auditor that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Review of the investigation records confirmed to the auditor that anything resembling an allegation of sexual abuse or sexual harassment is conducted until the evidence supports that it does not meet the definitions as established in 115.5 and 115.6. this was evidenced by a review of eighty-nine (89) investigations, of which thirty-one (31) were deemed to meet the definition of sexual abuse or sexual harassment.

Interview with investigators confirmed to the auditor that they have been made aware of allegations immediately in accordance with the Response Plan. This is evidenced by the eighty-nine investigations. The complete policy can be viewed on the website at PREA - Worcester County Sheriff's Office.

Summary of evidence to support a finding of compliance: Review of policy, investigations as well as interviews with the Sheriff and investigators support that any suspicion or knowledge of sexual abuse, sexual harassment, neglect, or retaliation will be reported to the supervisors through to the shift commander to the investigators. Therefore, the auditor finds there is sufficient evidence to support a finding of compliance.

115.31 Employee training

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Policy 915.00 Training and Staff Development
- Training Academy Schedule
- PREA Overview training curriculum
- · PREA training: Sexual/Protected Class Harassment
- · Orientation program for New Employees
- · Staff training records
- · Interview training coordinator
- · Interviews random staff
- · Informal interviews with substance abuse staff, education supervisor, and food service staff
- · PAQ
- · FAQ

The PAQ indicates that all employees who have contact with inmates who were trained on PREA requirements as outlined in the provision.

Policy - PREA states, Training 1. All staff shall be trained in detection of sexual abuse and sexual harassment, preserving physical evidence of sexual abuse, responding effectively and professionally to victims of sexual abuse and sexual harassment and in the reporting structure when allegations or suspicions of sexual abuse arise. The Training Division shall maintain a training plan to ensure that all Department staff are educated in their responsibilities concerning PREA. 2. All staff with inmate contact shall be trained in the following: a. The Department's zero tolerance policy for sexual abuse and sexual harassment. b. Detection, prevention, reporting and response to sexual abuse or sexual harassment. c. Inmates' rights to be free from sexual abuse and sexual harassment. d. The rights of staff and inmates to be free from retaliation for reporting sexual abuse and /or sexual harassment. e. The dynamics of sexual abuse and sexual harassment in confinement. f. The common reactions of victims of sexual abuse and sexual harassment. g. How to detect and respond to signs of threatened and actual sexual abuse. h. How to avoid inappropriate relationships with inmates. i. How to communicate effectively and professionally with inmates including LGBTI inmates. j. How to comply with laws related to mandatory reporting of sexual abuse to outside authorities. 3. The Training Department shall maintain all documentation.

Policy 915.00 Training and Staff Development confirms that all new staff receive sexual abuse/assault intervention/PREA and the training plan for in service training, basic training or orientation shall include PREA.

(a) (b)The auditor was provided the outline for the Basic Recruit Training Academy program and the training lesson plan for PREA. There are 133 slides. It is applicable to the Academy, and Orientation. It addresses the following: history of the law; purpose and goals of the law; zero tolerance; definitions associated with the law; inmates cannot legally consent to sexual relations, all reports are to be made to the Senior Shift Officer immediately, staff who violate the law are subject to disciplinary action up to termination; inmates shall be able to shower, use the toilet, etc. without female staff watching; transgender/intersex inmates will not be examine to determine genital status; an intake assessment is completed, community service providers are available for sexual abuse/sexual harassment counseling; sexual abuse grievances have specific criteria, retaliation is not allowed; medical and mental health requirements, investigations and evidence; how false allegations will be addressed; PREA posters, insurance that inmates who are LED or disabled will be ensured access to measures to prevent sexual abuse/harassment; signs of victimization, dynamics of sexual abuse (who are more victimized, who are predators), dynamics of sexual harassment, avoiding inappropriate behavior with inmates, and speaking effectively with inmates regarding sexual orientation, and mandatory reporting laws.

PREA training: Sexual/Protected Class Harassment reinforces definitions of sexual harassment.

The Academy schedule demonstrates that PREA is taught to new corrections officers. Training schedules were provided to

support the process of training for all staff. Training records were provided demonstrating all staff have completed the training. The facility houses male staff. Any staff who transfer would be enrolled in the Academy/Orientation training. The auditor informally interviewed staff during the tour who all confirmed knowledge of and attendance in training for PREA and their roles if they suspect, observe, or have knowledge of sexual abuse or sexual harassment during the course of their day at the Jail and House of Correction. All staff interviews confirmed that they have received the training and that it addresses the topics required.

- (c) This facility has been actively involved in PREA compliance since 2014. The interview with the training coordinator confirmed to the auditor that all staff have received the training. He confirmed that staff receive in-person training of PREA every year with the same topics as provided in the new employee training. Documentation was provided that supported this. He indicated that PREA is taught in new employee/academy training; staff receive this prior to assignment within the facility, demonstrating compliance with the FAQ issued October 2014.
- (d) The training coordinator confirmed that staff must pass a quiz in order to ensure they understood the training; therefore, providing electronic verification that they understood the training. The quiz was also provided to the auditor for review. Random staff interviews confirmed this to the auditor as well.

Summary of evidence to support a finding of compliance: Policies support that training will be conducted at least every two years with refresher information provided annually; however, the training is the same curriculum for both. Review of the training curriculum demonstrates that the required topics are addressed. Staff interviews additionally provided the auditor with evidence of compliance with the provisions of the standard. As clarified in the FAQ, staff receive PREA training prior to having contact with inmates.

115.32 Volunteer and contractor training

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Volunteer Orientation Lesson Plan
- Observations
- Interview contractors
- Review volunteer/contractor/vendor training records
- · Data base with volunteer records of back ground check and training
- Interview with the Volunteer Coordinator
- Interview with a volunteer
- · PAQ

The PAQ indicates there are 147 volunteers and contractors who have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Contractual staff include the following: Wellpath, Inc – medical, Central Massachusetts Center for Business and Enterprise EdHub – instruct Industrial Readiness Training, Quinsigamond Community College – inmate education (below 12th grade), Advocates, Inc mental health services, Anna Maria College – OpporTUNEity program.

Policy - PREA states, The WCSO shall ensure 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. (b) 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, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. (c) The WCSO shall maintain documentation confirming that volunteers and contractors understand the training they have received.

(a) (b) (c) The Volunteer Orientation Lesson Plan includes the law, costs, pros, purpose goals, definitions, objectives, prevention, public education, data collection/analysis, Intervention/medical and mental health, investigations, collection of evidence, notifications and refusal of treatment. The interview with the contractual staff (Wellpath, Inc, Advocates) confirmed that they have been educated on the requirements of PREA and their role in preventing, detecting and responding to sexual abuse or sexual harassment.

The interview with the Volunteer Coordinator/Captain relayed to the auditor the process for a volunteer initiating service and maintaining service at this agency. She confirmed that after applying and screening for appropriateness, a security clearance is conduct. Upon approval an orientation is schedule which addresses PREA. An acknowledgement is signed and noted in the data base. A copy of the data base was provided to the auditor. PREA is reviewed every two years. An interview with a volunteer conveyed to the auditor an in depth understanding of the PREA standards, and his role as a volunteer, including zero tolerance, reporting immediately. He conveyed that security staff are readily available to support the reporting process. The auditor was provided access to all Volunteer files. Three were randomly selected and supported that a background check was conducted and PREA orientation was provided, acknowledged in writing.

Summary of evidence to support a finding of compliance:

Based on review of the information provided to contractual staff and volunteers, review of the training documentation, interview with the contractual staff, interview with a volunteer and interview with the volunteer coordinator, the auditor finds sufficient evidence to support a finding of compliance with this standard.

Inmate education Auditor Overall Determination: Meets Standard Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Policy 940.01 Admission and Orientation
- · Inmate Handbook (English and Spanish)
- · Brochures/pamphlet English and Spanish
- · Observations Posters, pamphlets
- · Observation of the intake process
- Interviews Intake staff
- Interviews Random inmates
- · Intake records of orientation and corresponding log of received inmates
- Documentation of additional information in 30 days orientation
- · Observation of orientation activities
- · PAQ

The PAQ indicates that all inmates were admitted that were given information at intake 2481, 845 stayed past 30 days who received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

The following policy excerpts demonstrate compliance with the requirements of this standard:

Policy - PREA states, During the intake process, inmates shall receive information explaining the WCSO's zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. 5. Within 30 days of intake, the WCSO shall provide comprehensive education to inmates either in person or through video regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents and regarding WCSO policies and procedures for responding to such incidents. a. Current inmates who have not received such education shall be educated within one year of the effective date of the PREA standards and shall receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility. b. The WCSO shall provide inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. In addition to providing such education, the WCSO shall ensure that key information is continuously and readily available or visible to inmates through posters, s, or other written formats. c. The WCSO shall maintain documentation of inmate participation in these education sessions. d. In addition to providing such education, the WCSO shall ensure that key information is continuously and readily available or visible to inmates through posters, or other written formats.

Policy 940.01 Admission and Orientation

Orientation Housing Unit 1. Each inmate is provided an orientation within one week of admission which includes at a minimum: a. Rules and sanctions; b. Mail and visiting procedures; c. Transportation options for visitors; d. Grievance procedures; e. Deposits, charges, or co-payments that may apply; f. Services, programs, and eligibility requirements; g. Medical care; h. Pretrial release options; i. PREA policy, Zero tolerance, Sexual Harassment, Sexual Assault and Reporting requirements; and WCSO 940.01 - 6 j. Mandated reporters – staff are required to report to investigations staff for follow up on all sexual assault allegations. The above information is contained in a written handbook provided to each inmate and is translated into languages spoken by significant numbers of inmates. 2. Information about sexual abuse/assault, including prevention/intervention, self-protection, reporting, treatment and counseling shall be communicated orally and in writing in a language clearly understood. Should there be a language or literacy barrier, assistance is available through their Inmate Support Counselor.

(a) Inmates are provided the Inmate Handbook at Intake. The auditor observed this process during the onsite audit. The

Inmate Handbook is available in English and Spanish. Interviews with limited English inmates whose primary language was Spanish confirmed to the auditor they were asked what language was their primarily language and provided the materials. Random inmate interviews confirmed to the auditor that the Handbook is on their tablet, which is issued to them daily.

The Inmate Handbook has the following information: The Worcester County Sheriff's Department has a ZERO tolerance policy for criminal conduct, sexual abuse and harassment. If you violate the laws or Sheriff's Department policies while incarcerated, you could be prosecuted.

ZERO TOLERANCE FOR SEXUAL ABUSE AND SEXUAL HARASSMENT RIGHT TO REPORT If you, or someone you know, are experiencing sexual abuse or sexual harassment, the Worcester County Sheriff Office wants to know. We want you to report right away! Why? We want to keep YOU safe. · It is our job! It is your right to be free from sexual abuse and sexual harassment. · We want to conduct an investigation of the reported incident. · We want to hold the perpetrator accountable for his/her actions. · We want to provide YOU with relevant information and support services. HOW TO REPORT The Worcester County Sheriff's Office offers multiple ways to report sexual abuse and sexual harassment. Reports can be made anonymously. · All inmates can universally access the WCSO Hotline at (508)854-1845. · Report to any staff, volunteer, contractor, or medical or mental health staff. · Submit a grievance or a sick call slip. · Submit an in-house letter to the PREA coordinator, Captain Keith Hamilton. · A family member, friend, legal counsel, or anyone else inside or outside the facility can report on your behalf by calling (508)854-1845. · You also can submit a report on someone's behalf. VICTIM SUPPORT SERVICES The Worcester County Sheriff's Office partnered with Pathways for Change (former Rape Crisis Center) to provide survivors of sexual abuse with emotional support services. To access these services, contact: 1-800-870-5905, or write: 588 Main Street, Worcester, MA 01608 The Pathways 24 hour Hotline is free, confidential, unmonitored and unrecorded

- (b) Orientation is conducted when needed. The auditor observed orientation conducted by staff individually (due to changes implemented during the coronavirus pandemic). The PREA risk assessment is additionally reviewed at this time.
- (c) This does not apply to this facility. They have been actively involved with PREA compliance since 2015. The auditor finds this credible as the turnover at this facility is quick. Additionally, the auditor asked to speak with the inmate housed at the facility the longest, ten years. He confirmed that he has attended training regarding PREA and that the facility provides information on how to report (i.e. posters).
- (d) See policy and comments in 115.16. Additionally, the language line was utilized to interview one inmate who was LEP.
- (e) Two examples of the completion of orientation were requested and received for the following months: August 2021, September 2021, October 2021, November 2021, December 2021, January 2022, February 2022, March 2022, April 2022, May 2022, June 2022, July 2022 and August 2022. Documentation of attendance at orientation was provided as indicated above. Documentation of intake was provided through the Offender Management system (OMS) for the same randomly requested inmates.
- (f) Posters in English and Spanish have the following: ZERO TOLERANCE FOR SEXUAL ABUSE AND SEXUAL HARASSMENT RIGHT TO REPORT If you, or someone you know, are experiencing sexual abuse or sexual harassment, the Worcester County Sheriff Office wants to know. We want you to report right away! Why? We want to keep YOU safe. It is our job! It is your right to be free from sexual abuse and sexual harassment. We want to conduct an investigation of the reported incident. We want to hold the perpetrator accountable for his/her actions. We want to provide YOU with relevant information and support services. HOW TO REPORT The Worcester County Sheriff's Office offers multiple ways to report sexual abuse and sexual harassment. Reports can be made anonymously. All inmates can universally access the WCSO Hotline at (508)854-1845. Report to any staff, volunteer, contractor, or medical or mental health staff. Submit a grievance or a sick call slip. Submit an in-house letter to the PREA coordinator, Captain Keith Hamilton. A family member, friend, legal counsel, or anyone else inside or outside the facility can report on your behalf by calling (508)854-1845. You also can submit a report on someone's behalf. VICTIM SUPPORT SERVICES The Worcester County Sheriff's Office partnered with Pathways for Change (former Rape Crisis Center) to provide survivors of sexual abuse with emotional support services. To access these services, contact: 1-800-870-5905, or write: 588 Main Street, Worcester, MA 01608 The Pathways 24-hour Hotline is free, confidential, unmonitored and unrecorded.

Numerous posters providing information on PREA were visible throughout the facility, minimally several in each housing unit. Information is posted in Spanish and English. Inmates interviewed acknowledged that they knew of PREA by reading the posters; they are posted near the phones. All inmates interviewed confirmed they were aware of the PREA law, and how to report.

Summary of evidence to support a finding of compliance:

Policy, review of information provided to the inmates, observations of the intake process and orientation, interview with inmates, and interview with the intake staff provided the auditor with ample evidence to support a finding of compliance.

115.34 Specialized training: Investigations Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: Policy - PREA Observations Interviews investigative staff Training completion docs Curriculum for investigators Regular PREA Training documentation for investigators PAQ # of investigators agency The PAQ indicates there are eleven staff who have received the specialized PREA training for investigators. Policy - PREA states, The Special Services Division shall be trained to properly conduct sexual abuse complaints and will properly use Miranda and Garrity warnings. Investigators shall gather and preserve direct, circumstantial and DNA evidence and shall interview alleged victims, suspected perpetrators and witnesses. Investigator training shall include but not limited to: a. How to properly conduct sexual abuse complaints and will properly use Miranda and Garrity warnings; b. How to gather and preserve direct, circumstantial and DNA evidence; c. How to interview alleged victims, suspected perpetrators and witnesses; and August 2021 WCSO PREA - 19 d. Conduct a review of prior complaints involving he suspected perpetrator shall be conducted. (a) Training is conducted with the Massachusetts Department of Correction investigator training. The auditor reviewed documentation showing that the three investigators have received regular PREA training in addition to the specialized PREA training. The interview with the Director of Security, lead investigator, confirmed that the investigators also received the required PREA training.

(b) The auditor reviewed the training curriculum. The training curriculum addressed the following topics over a course of three days:

Introduction to Sexual Assault Investigation

Defining PREA

Evidence Protocol

Interviewing, including Miranda and Garrity

Investigative Outcomes

Documentation

Post Allegation

The auditor interviewed two investigators who both confirmed that the training does include the curriculum described above and they also attend regular PREA training as required for all staff.

(c) Training certificates were provided and reviewed for all eleven investigators.

Summary of evidence to support a finding of compliance: Policy supports the requirements of the standards. Review of the investigations with corresponding certificates of training of those who conducted the investigation supported compliance. Interview with the investigators demonstrated knowledge regarding Miranda and Garrity warnings, interviewing victims, dynamics of abuse in a confinement setting and evidence collection. Investigators are on call if needed. The interviews confirmed that they also attend regular PREA training. Therefore, the auditor finds there is sufficient evidence to support a finding of compliance.

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Observations
- · Interviews Medical staff
- · Interviews Mental health staff
- · Interview with Nurse Educator
- · Training curriculum
- · Training records, regular PREA training
- · PAQ

The PAQ indicates that the facility has fifty-four (54) medical and mental health staff, 100% have received the specialized training.

Policy - PREA states, The WCSO shall ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. a. If medical staff employed by the agency conduct forensic examinations, such medical staff shall receive the appropriate training to conduct such examinations. b. The WCSO shall maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the WCSO or elsewhere. c. Medical and mental health care practitioners shall also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the WCSO.

The auditor reviewed the training for Wellpath, Inc. It does now address specifically 1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. Additionally, it addresses (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' right to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

(a) (c) (d) Contractual staff are used in the area of medical health and mental health. In addition to policy, the auditor spoke to the Mental Health Director and the Health Service Administrator. The auditor was provided documentation that medical and mental health staff have been trained on regular PREA training and the specialized training. This was confirmed in the interviews with the training coordinator, medical supervisor and Mental Health Director. They confirmed that their staff receive the regular training in addition to specialized Medical and Mental Health training required by their company upon being hired at this facility and then annually. The auditor has reviewed the training and found that it addressed the topics required in the provision for both specialized medical and mental health staff and regular PREA training for Wellpath, Inc.

Mental health staff attended PREA training as required by all staff. The auditor interviewed the Nurse Educator (who revealed that she has been a SANE nurse) to discuss the training requirements for Wellpath, Inc. staff. She ensures all medical staff receive regular training and specialized training, at least yearly. With this process, the auditor reviewed the training curriculum and found that it did not address all the requirements of the regular PREA training. The curriculum was updated and provided to the auditor to support that it does not address all topics required in regular PREA training and specialized training for medical and mental health staff.

Summary of evidence to support a finding of compliance: Policy supports the requirements of the standard. Interviews with the medical and mental health staff, and review of training documents (completion of training and the curriculum) provided the auditor with sufficient evidence to support a finding of compliance.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Interviews Staff who perform risk screens intake staff
- Observation of the intake process
- Random inmate interviews
- Risk Assessment criteria
- · Random review of inmate's risk assessments
- Interview PREA Coordinator
- Observations of staff conducting the 30-day risk assessment review
- · PAQ
- · FAQ

The PAQ indicates that 2204 inmates were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility, 1285 who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. The facility reports there were seven potential victims and 1 potential predator housed at the facility on the first day of the onsite audit.

The following policies support compliance with this standard: Policy - PREA The Department shall perform an intake screening to obtain and use information about the inmate's history to reduce the risk of sexual abuse by or upon the inmate within twenty-four (24) hours of the inmate's being booked or upon transfer to the facility, excluding weekends (Worcester County Sheriff's Office Internal Housing Risk Form- Attachment 2 in OMS) Transgender inmates will have the option of getting female or male undergarments upon arrival. If an inmate wishes to buy more female undergarments, their ISC (Inmate Support Counselor) will help facilitate the purchase. 2. Upon intake, staff shall complete the New Transgender Checklist Form (Attachment 3) in PowerDMS and submit it via email to transgendernotification@sdw.state.ma.us 3. The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) the questions regarding: (PREA §115.41 (h)) a. Whether or not the inmate has a mental, physical, or developmental disability; b. Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; c. Whether or not the inmate has previously experienced sexual victimization; and d. The inmate's own perception of vulnerability. (PREA §115.41 (b) and WCSO 942.00 - Classification) 4. Within a set time period, not to exceed thirty (30) days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. Also, the inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. (Re-Assessment Screening Form – Attachment 4 in OMS) 5. Placement and programing assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. 6. The Department shall attempt to ascertain information about any gender nonconforming appearance or identification as a LGBTI inmate and whether the inmate may be vulnerable to sexual abuse. (WCSO 942.00 - Classification) 7. The Department shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. (WCSO 942.00 -Classification).

An example of a completed Risk Assessment was sent to the auditor with the pre-audit documentation. The objective screening tool used considers the following information:

Risk of Sexual Victimization

- mental, physical, development disability
- age (youthful under 21 yrs., elderly over 65 year)
- physical build

- · first incarceration
- · convictions for sex offense against an adult or child
- · perception of or self identifies as gay, lesbian, bisexual, transgender, intersex or gender nonconforming (area for notes from the screener)
- · history of sexual activity while incarcerated
- · crimes exclusively nonviolent
- · previous experience as a victim of sexual abuse community and while incarcerated
- · inmate's perception of risk for sexual abuse
- any needs related to disabilities
- detained solely for civil immigration purpose

The risk screen developed and used at this facility addresses all of the requirements of the provision of this standard. The screen addresses more detail regarding sexual victimization specifically questions pertaining to prior use of protective custody due to sexual victimization while incarcerated. The screen uses information from court records and the inmate responses. The screen is completed upon arrival by the intake staff and then with a follow up intake screen by medical staff. Screeners have received informal training by the PREA Coordinator on how to complete the risk assessment to provide consistency in assessments. The Offender Management System (OMS) based on the answers, calculates the designation of who is a potential victim and who is a potential predator. The Case manager who conducts orientation with the inmate also reviews the PREA Risk assessment, personally and privately within 30 days.

Observations made during the onsite audit revealed that in the intake operation, there are private interview rooms for classification staff, medical staff, and mental health to conduct intake assessments. each housing unit has interview rooms that are typically utilized by case managers, attorneys or others with a need to interview the inmate private. The auditor used these rooms for the interviews with inmates. Intake risk assessments are completed by classification staff, medical staff, mental health staff, and the case manager (30-day review).

Interview with staff who conduct risk assessments and the inmates confirmed to the auditor that the questions are asked verbally and privately.

(e) The screening tools addresses the following:

Risk of Sexual Abusiveness:

- history of sexual abuse or physical or sexual assault on others
- history of committing institutional sexual aggressive behavior
- history of sexual activity while incarcerated
- convicted of a violent offense
- · history of institutional extortion or assaults on others
- · prior domestic violence/ related order for such
- gang affiliation
- (f) Interviews with staff who complete the risk assessment verified to the auditor that they would make a notation if they believe an inmate is demonstrating effeminate mannerisms but will also note the response given the by individual. Therefore, the procedure is compliant with the clarifications in the FAQs for this standard.
- (g) The PREA Coordinator indicated that he assures that new information generates an updated risk assessment when referred by staff, when requested by staff, when an investigation has been completed which revealed information that warranted a new risk assessment. When reviewing investigations, the auditor saw documentation that a risk assessment was updated in response to the request by mental health staff based on receipt of new information.
- (h) The interview with the Intake staff and PREA coordinator confirmed that the agency would not require an inmate to answer sensitive questions (d)(1), (d)(7), (d)(8), or (d)(9) if they did not want to respond. Inmate interviews confirmed that they did not believe they would be disciplined if they did not respond.
- (i) Per the interview with the Intake staff and the PREA Coordinator, Risk assessments are maintained in the Offender

Management System (OMS) which has appropriate controls on which staff can access the data. The auditor inquired about how access is received, who approves it and it was confirmed that the Assistant Deputy Superintendent approves requests.

Additionally, review of the letters to other facilities regarding sexual abuse information received at this facility allowed the auditor to deduct that the interviews are effective in obtaining information.

Summary of evidence to support a finding of compliance: Policy supports compliance with all aspects of the standards. Inmates acknowledged being asked the questions on the risk assessment. Inmates were asked if they felt they would be disciplined for not answering the questions; they answered no. Interview with the intake staff and PREA Coordinator supports compliance with completing the risk screen upon arrival. Appropriate controls on the information are in place by maintenance in the OMS. Examples of the initial risk assessment and 30 days follow up assessment were requested and received for the following months: August 2021, September 2021, October 2021, November 2021, December 2021, January 2022, February 2022, March 2022, April 2022, May 2022, June 2022, July 2022 and August 2022 which provided evidence of the assessments being conducted. Therefore, the auditor finds there is sufficient evidence to support a finding of compliance.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Roster demonstrating potential victims and potential predators
- Observations
- · Response Plan for Sexual Assault
- · Interviews PREA Coordinator
- · Interview Staff who conduct risk screens
- Interview with Program officer
- · Interview with Classification staff
- Interview with random inmates and targeted inmates
- · Interview PREA Coordinator

Policy - PREA states, the Department shall perform an intake screening to obtain and use information about the inmate's history to reduce the risk of sexual abuse by or upon the inmate within twenty-four (24) hours of the inmate's being booked or upon transfer to the facility, excluding weekends (Worcester County Sheriff's Office Internal Housing Risk Form- Attachment 2 in OMS) Transgender inmates will have the option of getting female or male undergarments upon arrival. If an inmate wishes to buy more female undergarments, their ISC (Inmate Support Counselor) will help facilitate the purchase. 2. Upon intake, staff shall complete the New Transgender Checklist Form (Attachment 3) in PowerDMS and submit it via email to transgendernotification@sdw.state.ma.us 3. The policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) the questions regarding: (PREA §115.41 (h)) a. Whether or not the inmate has a mental, physical, or developmental disability, b. Whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming, c. Whether or not the inmate has previously experienced sexual victimization; and d. The inmate's own perception of vulnerability. (PREA §115.41 (b) and WCSO 942.00 - Classification) 4. Within a set time period, not to exceed thirty (30) days from the inmate's arrival at the facility, the facility will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening. Also, the inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. (Re-Assessment Screening Form - Attachment 4 in OMS) 5. Placement and programing assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. August 2021 WCSO PREA - 9 6. The Department shall attempt to ascertain information about any gender nonconforming appearance or identification as a LGBTI inmate and whether the inmate may be vulnerable to sexual abuse. (WCSO 942.00 -Classification) 7. The Department shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. (WCSO 942.00 - Classification)

Response Plan for Sexual Assault: The Assistant Deputy Superintendent of Classification or designee shall maintain and monitor a list of victims and predators assigned to their facility. A predator will be defined as any inmate and / or detainee that has been found guilty of a disciplinary report for any offense(s) associated with PREA. This list will be maintained within the Sheriff's Information Management System (OMS) and will be updated as necessary. This list will be accessible to the Classification Staff and a small list of administrative staff for monitoring purposes. 2. Any reported incidents involving sexually abusive behavior or related activities shall be included in the daily administrative meetings.

Upon learning that an inmate has been identified as having been a victim or a predator or is at risk for such, the Superintendent or designee shall communicate with the classification division so that appropriate housing decisions can be made to keep the inmates safe

(a) (b) The facility ensures that inmates who are potential predatory and potentially vulnerable are not housed in the same area. Additionally, they have numerous housing options including housing units that have single occupancy. The OMS has an Alert system that allows staff a warning if attempting to place a victim near a predator. Additionally, the auditor discussed this with the assigned Program Officer who assured the auditor he is aware of who is a victim and a predator; however, he indicated that classification staff are excellent at making decisions to ensure that they do not mix during

programming/education or work assignments. Interviews with classification staff confirmed this to the auditor, that this, in addition to many other factors, are used when making housing, cell, program and work assignments.

(c)(d) (e)(f) Documentation was provided demonstrating that reviews are conducted, at least every six months, that address the view of transgender inmates regarding their safety. The interview with the PREA Coordinator confirmed to the auditor that the PREA Coordinator would be responsible for this review with assistance of the case manager assigned to assist with their needs. The auditor finds this credible as the facility addresses other needs relating to their status (i.e clothing and hygiene items). The interview with the transgender females confirmed that their views have been given serious consideration regarding housing. They are comfortable with the separate shower time and pat search/strip search options. They indicated that staff check in on them frequently. One indicated she is pursuing a transfer to a female facility and that the facility is working with her on this (as it would involve a transfer to another county). Staff were aware of this request. At a subsequent audit at another facility which houses females completed by this auditor, it was confirmed that this transfer had occurred.

(g) During the audit process of touring, reviewing documentation and interviewing staff, it is determined that this facility does not have dedicated facilities, units, or wings solely on the basis of such identification or status as transgender, intersex, homosexual, bi-sexual, gay or lesbian.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Interviews with all staff and targeted inmates and overall observations provided the auditor with sufficient evidence to support a finding of compliance.

115.43 Protective Custody Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Observations: During the tour of Restricted Housing
- · Interviews Superintendent
- · Interviews Staff who supervise Restrictive Housing
- · PREA Incident Form
- · PAQ

The PAQ states that no inmates have been placed in involuntary protective custody due to their high risk of sexual victimization. The auditor found no evidence to dispute this during the audit process.

Policy - PREA states, The Department shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. (WCSO 942.00 - Classification) 8. Inmates shall be housed from others only as a last resort when less restrictive measures are inadequate to keep them and others safe. a. These inmates shall receive the opportunity to exercise daily and shall receive any legally required educational programming. They shall also receive daily visits from a medical or mental health clinician and shall have access to other programs and work details to the extent that is operationally possible. (WCSO 942.00 - Classification) If the WCSO restricts access to programs, privileges, education, or work opportunities, the WCSO shall document the following: The opportunities that have been limited; The duration of the limitation; and The reasons for such limitations. b. The facility shall assign inmates to Special Management housing only until alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. c. If involuntary Special Management housing assignment is made the WCSO shall document the following: The basis for the facility's concern for the inmate's safety; and The reason why no alternative means of separation can be arranged. d. Every thirty (30) days, the WCSO shall afford each inmate a review to determine whether there is a continued need for separation from the general population. The classification department will complete the 30 day assessment using page 2 of the PREA Incident Form (Attachment 5). e. Any use of Special Management housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to all above requirements.

The PREA Incident Form addresses the need for additional documentation if the victim is moved to restrictive housing. A limitation assessment is completed by the SSO.

Summary of evidence to support a finding of compliance:

Policy reflects compliance with the provisions of the standards. The PAQ states that no inmates have been placed in restrictive housing for protective custody to separate a victim from his abuser. The auditor found no reason to dispute this fact during the audit process. Due to the physical plant, the facility has numerous options for placing an inmate for separation from his abuser without having to resort to placement in protective housing status. The interview with the Superintendent confirmed that restrictive housing will be used as a last resort. Interviews with one supervisor of the restrictive housing area and one officer who was working in this area support that they have no knowledge of inmates who are alleged victims, or at risk for victimization being placed in this unit. The PREA Incident Form ensures this is addressed in the event that a victim is moved to restrictive housing. Based upon the written authority, observations and these interviews, the auditor finds the facility is substantially compliant with this standard.

115.51 Inmate reporting Auditor Overall Determination: Meets Standard Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- · Inmate Handbook
- Response Plan for Sexual Assault
- PREA Training Curriculum
- PREA posters
- · Interviews inmates
- Interviews random staff
- Investigations
- · Testing of inmate phone internal hotline
- · Interview with mailroom staff

The following policy require compliance with this subpart: Policy - PREA Inmates shall receive PREA information in the Inmate Handbook as well as during Medical Intake and shall be responsible for familiarizing themselves with it. (Sexual Abuse / Assault / PREA Reporting Acknowledgement — Attachment 6/7) They are also responsible for reporting allegations to staff in a timely manner. (PREA §115.33 (f)) Inmates shall be notified that they may call the confidential hotline to report allegations of sexual abuse / harassment.

The Inmate Handbook has the following information: The Worcester County Sheriff's Department has a ZERO tolerance policy for criminal conduct, sexual abuse and harassment. If you violate the laws or Sheriff's Department policies while incarcerated, you could be prosecuted. ZERO TOLERANCE FOR SEXUAL ABUSE AND SEXUAL HARASSMENT RIGHT TO REPORT If you, or someone you know, are experiencing sexual abuse or sexual harassment, the Worcester County Sheriff Office wants to know. We want you to report right away! Why? We want to keep YOU safe. It is our job! It is your right to be free from sexual abuse and sexual harassment. We want to conduct an investigation of the reported incident. We want to hold the perpetrator accountable for his/her actions. · We want to provide YOU with relevant information and support services. HOW TO REPORT The Worcester County Sheriff's Office offers multiple ways to report sexual abuse and sexual harassment. Reports can be made anonymously. · All inmates can universally access the WCSO Hotline at (508)854-1845. Report to any staff, volunteer, contractor, or medical or mental health staff. Submit a grievance or a sick call slip. Submit an in-house letter to the PREA coordinator, Captain Keith Hamilton. · A family member, friend, legal counsel, or anyone else inside or outside the facility can report on your behalf by calling (508)854-1845. You also can submit a report on someone's behalf. VICTIM SUPPORT SERVICES The Worcester County Sheriff's Office partnered with Pathways for Change (former Rape Crisis Center) to provide survivors of sexual abuse with emotional support services. To access these services, contact: 1-800-870-5905, or write: 588 Main Street, Worcester, MA 01608 The Pathways 24-hour Hotline is free, confidential, unmonitored and unrecorded. Additionally, they contain information indicating that a report of sexual assault can be made to the District Attorney's Office, address provided. The audit additionally received documentation demonstrating that the District Attorney will report matters immediately, including those that are reported anonymously.

(a)(b) As illustrated in the response to standard 115.33, the Handbook includes information on how to report in detail. The review of the investigations reflects that inmates are aware of how to report. They used the hotline, reported to mental health staff, grievance and direct report to other staff. Inmates are provided information regarding how to makes reports in at intake via the Inmate Handbook, and PREA posters viewed throughout the facility. All inmate interviews support knowledge of several options. This included most having knowledge that they can report anonymous and on behalf of another inmate. Inmates have a hotline number which can be called form the inmate phone; a PIN number is required to make this call. The auditor tested the line with the assistance of an inmate who allowed his PIN number to be used and a message was left. It was quickly transmitted back to the PREA Coordinator acknowledging receipt. This is noted on PREA posters throughout the facility; posters are located next to the phones. Most inmates were knowledgeable regarding this number being available. Random inmate interviews relayed to the auditor that they receive tablets regularly which affords the ability to make phone calls. Inmates in restricted housing are allowed out of cell time in which the phones in the dayroom are available for use.

Inmates informed the auditor that mail is placed in a secure mailbox in the unit. The interview with the mailroom staff

confirmed that outgoing mail is not searched, just checked for proper postage and return address. Inmates confirmed that return mail is handed to them by staff. Additionally, the handbook informs inmates regarding how to use the mail system if indigent. See below: The mail clerk shall record all outgoing legal mail in the Sheriff's Information Reporting System (OMS), stamp the mail if the inmate is indigent and then place it with the outgoing mail. Indigent inmates shall be permitted an unlimited number of postage free letters each week for privileged, confidential correspondence and three postage free letters each week for general correspondence.

- (c) The provision requires that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. Staff interviews confirmed that staffs are aware of this expectation and support compliance, including the reporting of suspicions to their immediate supervisor, stating that this information is well received and handled appropriately by the supervisors. They acknowledged that inmates are able to report privately if the request is made to speak to the supervisor. Investigations revealed they reported privately to mental health staff. Review of the investigations supported that reports are made verbally to staff, documented and reported immediately to their supervisor and/or the Shift Commander.
- (d) Staff interviews revealed that they could go directly to the PREA Coordinator, Superintendent or their union to report sexual abuse privately. Many were not aware of the option to call the County District Attorney but agreed after this was prompted, that this too was an option. The Response Plan addresses that all allegations will be transmitted through a confidential email only sent to upper management. Follow up comments included that in their experience, never having a concern which would warrant that type of report.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Staff and inmate interviews acknowledge there are multiple methods for filing a complaint. Investigations were initiated based on numerous avenues. Information in the Inmate Handbook supports those indigent inmates will be afforded the ability to send correspondence. Review of the policies, investigations, interviews with staff and inmates, information provided at orientation all provided the auditor with sufficient evidence to support a finding of compliance with the standards.

115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Policy 934.02 Inmate Grievance procedures
- · Interview Grievance Coordinator
- Review of investigations initiated by a grievance
- · Inmate Handbook

The PAQ indicates there have been the following

Zero grievances regarding sexual abuse

Zero grievances regarding sexual abuse that reached final decision within 90 days after being filed:

Zero grievances regarding sexual abuse that that involved extensions because final decision was not reached within 90 days:

Zero grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline

Zero grievances alleging imminent risk of sexual abuse

Zero grievances resulting in disciplinary action for having filed the grievance in bad faith

Policy - PREA states, Filing a Grievance / Submitting a Complaint 1. An inmate who alleges sexual abuse may file a grievance at any time without submitting it to a staff member who is the subject of the complaint. The grievance will not be referred to a staff member who is the subject of the complaint. (WCSO 934.02 - Grievances) There shall be no time limit on submitting a grievance alleging sexual abuse. (PREA §115.52 (b) (1)) 2. Third parties including staff members, attorneys and outside advocates may assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse. This policy prohibits the use of inmate interpreters, August 2021 WCSO PREA - 11 inmate readers, or other types of assistants except in limited circumstances where 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. (PREA §115.52 and WCSO 934.02 - Grievance) a. 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 their behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process. (PREA §115.52) b. If the inmate declines to have the request processed on their behalf, the agency shall document the inmate's decision. (PREA §115.52)

Policy 934.02 Inmate Grievance procedures states, If the grievance indicates a substantial risk of imminent sexual abuse, the grievance will be immediately addressed by the IGC who will provide an initial response within forty-eight (48) hours and a final decision within five days.

The interview with the Grievance Coordinator confirmed that any grievance received will be closed out and referred to the investigators for investigation. Two grievances initiated a PREA investigation for sexual harassment.

Summary of evidence to support a finding of compliance:

Policy reflects compliance with the provisions of the standards. The PAQ indicates there have been no grievances received alleging sexual abuse. The interview with the Grievance Coordinator confirmed the grievance is processed and timelines/requirements noted in policy would be followed. Review of the investigations revealed that no grievance was filed related to sexual abuse, only harassment. The Inmate Handbook educates the inmates on the grievance process regarding sexual abuse.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Observations
- PREA brochure
- PREA Posters
- · Interviews random inmates
- · Inmate Handbook
- MOU with Pathways for Change
- Documentation of completed calls
- · Interview Director for Pathways to Change
- Interview with Mailroom staff

Policy - PREA Victim Advocate - A Community Service provider (Pathways for Change Inc.) that will provide inmates with confidential emotional support services related to sexual abuse. This service will be provided at the hospital.

(a) (b) (c) The facility does provide the inmates access to outside victim advocates for emotional support by giving them the mailing address and telephone number. It is posted in the unit and also noted in the Inmate Handbook, instructing inmates that the number is toll free and confidential (no pin required). This affords the inmates reasonable communication. This is in accordance with an MOU established with the Pathways for Change. The auditor tested the inmate phone during the onsite visit and was able to reach the advocate. Most interviews with the random and targeted inmates knew of the service as they recalled it is posted by the phone but indicated they had not need or desire to use that service, nor understand what the service was about. Documentation was provided that demonstrated that the phone was called over 100 times during the previous 12 months. The auditor requested that the information regarding this organization be uploaded to the tablet. They agreed and provided the auditor with documentation of the request before the onsite audit was concluded.

The Inmate Handbook and Posters visible throughout the facility states, VICTIM SUPPORT SERVICES The Worcester County Sheriff's Office partnered with Pathways for Change (former Rape Crisis Center) to provide survivors of sexual abuse with emotional support services. To access these services, contact: 1-800-870-5905, or write: 588 Main Street, Worcester, MA 01608 The Pathways 24-hour Hotline is free, confidential, unmonitored and unrecorded.

The auditor interviewed the mailroom staff who confirmed that inmates can send mail out confidentially unless they receive information of a security risk. Otherwise, mail is not opened going out, it just requires proper return address information and postage.

The auditor interviewed one of the managing directors of Pathways for Change via telephone. She confirmed to the auditor that they have a great working relationship with Worcester County Jail. They will continue to provide services via the emotional support hotline and/or advocacy services if an inmate is sent to the hospital. She confirmed her agency has the ability to address limited English calls through multi-lingual staff and a language line service. Her staff receive training at least twice annually and meet the requirements as set forth by the Commonwealth of Massachusetts. An advocate is provided for inmates sent to the hospital through request by the facility or the hospital for a SANE exam through contact by the jail staff and the hospital.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The MOU and interview with the program manager with Pathways for Change, testing on the phone access for inmates, information provided at intake in the Inmate Handbook, interview with mailroom staff, information on the PREA posters and inmate interviews supports a finding of compliance.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Observations
	· Facility website
	· Testing of the reporting phone number
	· FAQ
	The facility website has the following information:
	The Worcester County Sheriff's Office (WCSO) is committed to Zero Tolerance prevention and elimination of sexual abuse perpetrated against inmates by staff members or other inmates. Meeting the objectives set forth within the Prison Rape Elimination Act of 2003 is a major priority for the Sheriff's Office and an ongoing focus for staff efforts at all levels of this organization. A family member, friend, legal counsel, or anyone else outside the facility can report sexual harassment and/or sexual abuse by calling the WCSO Hotline at (508) 854-1845.
	To access information about how to report suspected sexual abuse, statistics and policy information, please see the below links.
	Worcester County Sheriff's Office 5 Paul X Tivnan Dr West Boylston, MA 01583 508-854-1800
	The PREA Policy is also available on the agency website.
	The auditor called the number from an outside line, left a message and received confirmation within 30 minutes of receipt.
	Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Review of the website, testing of the contact information and interviews with the Superintendent and the PREA Coordinator acknowledging that third party complaints will be immediately addressed, all provided the auditor with sufficient evidence to

support a finding of compliance.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Policy 914.12 Staff/Inmate Relations
- Observations
- · Interviews random staff
- · Interviews medical & mental Health staff
- · Interview PREA Coordinator
- Inmate Handbook
- · Interview with the investigator
- · Review of investigations

Policy - PREA states, All allegations and incidents of sexual assault or harassment on inmates shall be immediately reported by staff to the Senior Shift Officer. a. All WCSO staff, contractors and volunteers shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports. b. Failure to report these allegations or incident by staff may result in disciplinary action up to and including termination. 2. During non-business hours, the Senior Shift Officer shall contact the Superintendent or designee, and Special Services Investigations Department regarding an allegation or incident of sexual assault or harassment. Upon initiation of services, medical providers shall inform the inmates of their duty to report and the limitation of confidentiality unless otherwise precluded by law. Staff is prohibited from revealing any information related to sexual abuse to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Policy 914.12 Staff/Inmate Relations states, Staff who suspect or have knowledge that a violation of this policy has occurred are responsible to report same orally and in writing to their supervisor or other Sheriff's Office management staff. Such report shall be made immediately. If information is obtained away from the workplace, the report shall be made as soon as possible and no later than the staff person's next scheduled workday. 4. Supervisors are responsible to make notifications to, and forward reports through the chain of command to the Superintendent or the Special Sheriff. 5. Failure by staff to make any of the reports required above may subject them to disciplinary action up to and including discharge. Inmates may file a complaint or forward information on staff misconduct, including staff sexual misconduct with inmates, via a request form or a letter, or by speaking directly with any staff member. Any staff member receiving such complaint or information shall immediately forward same through their chain of command. Inmates also have the ability to report sexual abuse to an outside agency. All ways to report are listed in the Inmate Inmate Handbook and are reviewed at the Inmate Orientation. Failure to do so may subject the staff member to disciplinary action up to and including discharge.

(a) (b) Interviews with staff revealed that staff are keenly aware of the requirement to report immediately any suspicion, knowledge or information on sexual abuse, sexual harassment, retaliation and/or staff neglect that may contribute to sexual abuse or sexual harassment. Review of the investigations and interviews with the investigators support that an immediately notification is made.

Staff were clearly aware of the requirement to maintain confidentiality after the allegation is made.

- (c) The interviews with medical and mental health staff confirmed to the auditor their awareness that they need to report. The Inmate Handbook informs the inmates that all staff have a duty to report any sexual abuse or sexual harassment, including medical and mental health practitioners. At intake, inmates sign acknowledging that they have been informed that medical and mental health staff have a duty to report an information or suspicions of sexual abuse and sexual harassment.
- (d) This facility does not house inmates under the age of 18. Per the Massachusetts State Law, Elder abuse states, Elder Protective Services can only investigate cases of abuse where the person is age 60 and over and lives in the community.
- (e) Review of the investigations and interview with the investigators support that all allegations are referred to the investigators for review and investigation. This was confirmed by the interview with the investigators.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Overall observations of the audit tasks such as the interviews with staff, including medical and mental health, administrators, investigators, review of state laws, and investigations support knowledge of the requirement for reporting, process for reporting and need to maintain confidentiality.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Policy - PREA
	· Observations
	· Interviews Sheriff
	· Interview Superintendent
	· Interview Random staff
	· PAQ
	The PAQ indicates there have been no times the facility determined that an inmate was at risk of imminent sexual abuse. The auditor found no reason to dispute this during the audit process.
	Policy - PREA states, The Department shall take immediate action when an inmate is at substantial risk of imminent sexual abuse.
	Policy, physical plant, camera monitoring and all staff interviews support that the facility is prepared and willing to protect any inmate from any risk of harm.
	Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The interview with the Sheriff and the Superintendent confirmed that an inmate at imminent risk of sexual abuse or any imminent risk of harm shall have immediate action taken to ensure his safety. All staff interviews confirmed to the auditor that they would take immediate action if they believed an inmate was at imminent risk of sexual abuse. Inmate interviews illustrated to the auditor that staff are approachable. Corrections Officers and supervisors confirmed that this request to intervene before something has occurred would be supported, and action would be taken to protect the inmate before the suspected event occurred. Based on this and overall observations during the audit, the auditor found this credible and to be an integral part of the culture of this facility.

115.63 Reporting to other confinement facilities Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: Policy - PREA Interview Superintendent Notifications to other agencies/investigation initiation Observations of notifications in the investigation files PAQ The PAQ indicates that eight allegations were received that inmate was abused while confined at another facility, zero allegations of sexual abuse were received from another facility. Policy - PREA states, If an allegation is made where a sexual assault took place in another penal institution the WCSO Superintendent will contact the Superintendent or Facility Administrator of the institution that the allegation was made within seventy-two (72) hours either by phone, email or letter. All investigation information will be passed on to the other facility. The Special Services Division will investigate all allegations of sexual abuse and sexual harassment, including third party reports of sexual abuse and sexual harassment. These investigations shall be conducted promptly, thoroughly and objectively by a PREA trained investigator following U.S. Department of Justice, Office on Violence Against Women National Protocol for Sexual Assault Medical Forensic Examinations, 2d (April 2013) (PREA §115.71 (a-b)) All investigations shall be completed even if the alleged abuser or alleged victim is no longer employed at WCSO or is no longer in its custody. (a)(b) (c) As indicated, there were eight allegations that were reported to other facilities. The interview with the Superintendent confirmed his awareness that this notification is from facility head to facility head and must be completed within 72 hours of the allegation being received. The examples provided were not to the agency head of the receiving facility. The facility was reminded of the requirement, another document was sent demonstrating this. (d) The interview with the Superintendent confirmed that any receipt of allegations that occurred at his facility will be immediately reported to the investigators for investigation. The PAQ indicated they had not received any; the auditor found this credible during the audit process and review of the investigations.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards.

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

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Response Plan for Sexual Assault
- Random staff interviews
- PREA Training Curriculum
- · PAQ
- Observations

The PAQ indicates there were five allegations of sexual abuse, zero times the first security staff member to respond to the report separated the alleged victim and abuser, one allegations of sexual abuse that allowed for time to collect evidence, one allegations where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence:. There were zero times that a security staff or non-security staff responded that allowed for the collection of evidence.

The following policy excerpts support compliance with this standard.

Policy - PREA: The Senior Shift Officer shall immediately be notified in the event of a sexual abuse incident or allegation. a. The Senior Shift Officer will complete the PREA incident form (Attachment 5) attach it to an email and send to: preaalert@sdw.state.ma.us b. The Senior Shift Officer will notify the Assistant Superintendent of Operations. c. The scene shall be secured for possible crime scene processing. d. The inmate's behavior and appearance shall be noted and documented by the supervisor on scene. August 2021 WCSO PREA - 13 e. A list of potential witnesses shall be compiled by supervisor on scene. f. Detailed report(s) shall be written with the Senior Shift Officer no later than the end of the shift. (PREA §115.65) 2. The Classification Department shall be notified of the incident or alleged incident. a. If an inmate alleges that he was sexually abused, the alleged victim and suspected abuser shall be separated. If the alleged attack happened within a time frame that will allow for the collection of evidence, a request will be made to the alleged victim to refrain from taking any actions that could destroy physical evidence. Steps shall be taken to preserve and protect any crime scene until appropriate steps can be taken to collect evidence. b. The inmate who is suspected of sexually abusive behavior shall be placed in a special management unit, a dry cell or the medical unit pending investigation.

The Response Plan for Sexual Assault states, In the event that an inmate reports being a victim of a sexually abusive behavior, the staff person receiving such complaint shall secure the crime scene and immediately notify the Senior Shift Officer. Sexually abusive behavior includes acts of intimacy, sexual contact, sexual abuse and staff sexual misconduct. 2. The staff person receiving such complaint shall file a confidential incident report in OMS as soon as possible but before the end of their shift. 3. The Senior Shift Officer shall utilize the Inmate Sexual Assault Checklist (Attachment 1) and the Notification List (Attachment 2) and ensure the following steps are taken: a. Notify the PREA Incident team by email: PREAALERT@sdw.state.ma.us b. Notify the Assistant Superintendent of Operations and the Assistant Deputy Superintendent of Special Services immediately via email and phone. c. The Special Services Investigators/ Sexual Assault Investigators shall be notified immediately. Once Investigators are assigned to the case, the investigator will notify the Senior Shift Officer (SSO) of how the investigation will begin. If during non-business hours, the Assistant Deputy Superintendent of Special Services shall be called. Dispatch shall use the on-call list that is posted in Special Services for the evening and weekend coverage. Once Special Services Investigators arrive on scene, they will be responsible for taking control of the crime scene and initiating an investigation of the alleged assault. d. The inmate victim shall immediately be taken to the Health Services Unit for emergency medical care and a mental health assessment (if Mental Health staff is not available, medical will do the assessment.) The victim will be provided unimpeded access to emergency medical treatment and crisis intervention through Pathways for Change at the 24-hour confidential hotline. The number is 1-800-870-5905. e. Assign a Housing Unit Officer to ensure control of the area and to prevent unauthorized personnel from entering. f. The victim shall be requested not to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. g. Under no circumstances shall the perpetrator be allowed to wash, shower, eat, drink, brush teeth, urinate/ defecate etc.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Policy provides specific direction on how to respond to an allegation of abuse to ensure safety of the victim as well as how to preserve evidence. Both first responder staff and non-first responder staff attend training as required in 115.31; these requirements are reinforced at that time. All staff interviews demonstrated knowledge of the process support a finding of compliance. Observations during the tour reflected that correctional officers are assigned to all areas of the facility; no volunteer, contractual staff or program staff were isolated from correctional staff when conducting their job with inmates in the area. There is a staff and supervisor first responder card, pocket sized, developed for staff to reference should they be the first to respond to an allegation of sexual abuse that allowed for the collection of evidence.

115.65 Coordinated response

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- PREA Training Curriculum
- · Random staff interviews
- · Observations PREA kit
- · Interview Superintendent
- · Interview with Shift Supervisor
- · PREA Incident Reports

Policy - PREA states, The Senior Shift Officer shall immediately be notified in the event of a sexual abuse incident or allegation. a. The Senior Shift Officer will complete the PREA incident form (Attachment 5) attach it to an email and send to: preaalert@sdw.state.ma.us b. The Senior Shift Officer will notify the Assistant Superintendent of Operations. c. The scene shall be secured for possible crime scene processing. d. The inmate's behavior and appearance shall be noted and documented by the supervisor on scene. August 2021 WCSO PREA - 13 e. A list of potential witnesses shall be compiled by supervisor on scene. f. Detailed report(s) shall be written with the Senior Shift Officer no later than the end of the shift. (PREA §115.65) 2. The Classification Department shall be notified of the incident or alleged incident. a. If an inmate alleges that he was sexually abused, the alleged victim and suspected abuser shall be separated. If the alleged attack happened within a time frame that will allow for the collection of evidence, a request will be made to the alleged victim to refrain from taking any actions that could destroy physical evidence. Steps shall be taken to preserve and protect any crime scene until appropriate steps can be taken to collect evidence. b. The inmate who is suspected of sexually abusive behavior shall be placed in a special management unit, a dry cell or the medical unit pending investigation.

WCSO Response Plan for Sexual Abuse: RESPONDING TO SEXUALLY ABUSIVE BEHAVIOR COMPLAINTS 1. In the event that an inmate reports being a victim of a sexually abusive behavior, the staff person receiving such complaint shall secure the crime scene and immediately notify the Senior Shift Officer . Sexually abusive behavior includes acts of intimacy, sexual contact, sexual abuse and staff sexual misconduct. 2. The staff person receiving such complaint shall file a confidential incident report in OMS as soon as possible but before the end of their shift. 3. The Senior Shift Officer shall utilize the Inmate Sexual Assault Checklist (Attachment 1) and the Notification List (Attachment 2) and ensure the following steps are taken: a. Notify the PREA Incident team by email: PREAALERT@sdw.state.ma.us b. Notify the Assistant Superintendent of Operations and the Assistant Deputy Superintendent of Special Services immediately via email and phone. c. The Special Services Investigators/ Sexual Assault Investigators shall be notified immediately. Once Investigators are assigned to the case, the investigator will notify the Senior Shift Officer (SSO) of how the investigation will begin. If during non-business hours, the Assistant Deputy Superintendent of Special Services shall be called. Dispatch shall use the on call list that is posted in Special Services for the evening and weekend coverage. Once Special Services Investigators arrive on scene, they will be responsible for taking control of the crime scene and initiating an investigation of the alleged assault. d. The inmate victim shall immediately be taken to the Health Services Unit for emergency medical care and a mental health assessment (if Mental Health staff is not available, medical will do the assessment.) The victim will be provided unimpeded access to emergency medical treatment and crisis intervention through Pathways for Change at the 24-hour confidential hotline. The number is 1-800- 870-5905. e. Assign a Housing Unit Officer to ensure control of the area and to prevent unauthorized personnel from entering. f. The victim shall be requested not to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. g. Under no circumstances shall the perpetrator be allowed to wash, shower, eat, drink, brush teeth, urinate/ defecate etc. h. A medical staff member shall evaluate and document the extent of the physical injury and provide emergency treatment as needed. i. A determination of possible referral to an outside hospital with a rape crisis unit shall be made by the operation captain in conjunction with medical staff. j. If the determination is made that the inmate should be sent to an outside hospital and the inmate victim consents, the alleged victim shall meet with a Sexual Assault Nurse Examiner (SANE) where he will receive preventative treatment. k. Upon return from the outside hospital, the inmate victim shall be brought to the Health Services Unit for appropriate follow up care including a mental health August 2021 WSCO - PREA Response Plan - 3 screening from the Mental Health staff. If after normal business hours the medical staff will conduct the screening and alert the Mental Health staff for follow up as soon as possible. I. If the inmate victim is at risk of harming himself, the inmate will be seen immediately by the Mental Health staff or placed on Pending Mental Health Assessment. Otherwise, the inmate shall be seen no later than the next business day. m. The inmate shall be allowed to refuse rape crisis intervention treatment. In such cases, the mental health staff shall attempt to discuss the options that the inmate has to receive treatment. If this discussion

is unsuccessful, a Refusal of Treatment form (Attachment 3) shall be signed by the inmate. n. If the inmate does not speak English, the WCSO Medical and Security Staff shall make arrangements for interpreter services (Language Line phone number is in Dispatch) prior to, but without delaying, transportation of the inmate to the hospital. o. All efforts shall be made to ensure that the area and its contents are not disturbed. All entries in to the area will be documented in OMS documenting the time and name of those entering the crime scene. Only authorized personnel are to enter the crime scene (Special Services Investigators and the State Police). p. In those instances when an inmate reports having been a victim of a sexual assault, well after the alleged occurrence, the above steps should still be followed. The Superintendent, after consultation with Special Services Investigators and Health Services personnel, should determine whether, given the reported incident date, any evidence of an assault may exist warranting transportation to an outside hospital.

This information is reinforced in the training curriculum provided to staff regarding PREA. The response was discussed with the Senior Supervising Officer (SSO) during the audit; he relayed the details in accordance with the plan. The interview with the Superintendent confirmed the Response Plan, articulating the details of the response to include the notification email.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Review of the coordinated plan, review of the training curriculum which reinforces the actions of the plan, interviews with all staff who conved they were knowledgeable regarding the plan, all provided the auditor with sound evidence that the plan is detailed, and coordinates actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Policy - PREA
	· Union contract
	· Interview Sheriff
	· Interview with a union representative
	Policy - PREA: The Department shall not enter a collective bargaining agreement that limits the Department's ability to remove any staff member who is alleged to be a sexual abuser from contact with inmates during the investigation or limits the level of discipline that is warranted.
	The auditor reviewed the following document and found no limits to the Sheriff's Office to remove alleged staff abusers.
	· Memorandum of Agreement between Worcester County Sheriff's Department and New England Police Benevolent Association
	· Memorandum of Agreement between Worcester County Sheriff's Department and National Association of Government Employees
	The interview with the Sheriff confirmed he has no obstacles from the union if his staff believed it is warranted to remove a staff from the assignment related to an allegation of sexual abuse. An interview with a union representative indicated that his union has no concern with the need to remove staff from contact pending an investigation.
	Summary of evidence to support a finding of compliance: Review of policy and review of the union agreement as well as the

interview with the Sheriff and union representative support the finding of compliance.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- · Interviews Sheriff
- · Interview Superintendent
- · Interview with designated staff members charged with monitoring for retaliation
- · Retaliation Monitoring Forms
- · Interview with inmates who reported sexual abuse
- PAQ

The PAQ indicates that there were no reported incidents of retaliation occurred. The auditor found no reason to dispute this during the audit process.

Policy - PREA: For at least ninety (90) days following a report of sexual abuse, all Assistant Deputy Superintendents along with the PREA coordinator shall monitor the conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff and shall act promptly to remedy any such retaliations. Items the PREA coordinator should monitor include any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond ninety (90) days if the initial monitoring indicates a continuing need. In the cases of inmates, such monitoring shall also include periodic status checks performed by the PREA coordinator utilizing the PREA Retaliation Review form (Attachment 9).

The PREA Coordinator is designated as the person responsible for retaliation monitoring. He confirmed he does check in with the inmates weekly and would extend the monitoring beyond 90 days if deemed warranted. Twelve completed documents demonstrating retaliation monitoring was provided to the auditor. The form addresses the requirements of the provisions. They reflected that monitoring starts at the initiation of the report, involved face to face meetings typically weekly, and review of mail, phones, program reports, and disciplinary reports. He indicated he has not had to monitor staff who may fear retaliation yet but would if deemed necessary in accordance with the requirements of the standard. Review of completed retaliation monitoring forms support that the activities required to monitor for retaliation are occurring. Conversations during inmate interviews (targeted) support to the auditor that the PREA Coordinator does meet regularly with inmates who reported abuse to ensure no retaliation is occurring.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Interview with the designated retaliation monitor supported compliance based on his responses to questions, experience at the facility and specific documentation he provided showing how he accomplishes this task. The interviews with the Sheriff, Superintendent, and PREA Coordinator support that the facility will protect anyone who fears retaliation. The physical plant affords numerous options to change housing, if needed. In an extreme event, they can make arrangements with another county jail to have him placed there. Interviews with targeted category inmates provided further evidence that the provisions in this standard are being addressed.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- · Interview Superintendent
- · Interview Staff who supervise restrictive housing
- · PAQ

The PAQ indicates there has been no incident where an inmate who suffered sexual abuse was held in involuntary segregated housing in the past twelve months. The auditor found no reason to dispute this during the audit process.

Policy - PREA states: The Department shall use all relevant information to make classification and programming decisions with the goal of keeping all inmates safe and free from sexual abuse. (WCSO 942.00 - Classification) 8. Inmates shall be housed from others only as a last resort when less restrictive measures are inadequate to keep them and others safe. a. These inmates shall receive the opportunity to exercise daily and shall receive any legally required educational programming. They shall also receive daily visits from a medical or mental health clinician and shall have access to other programs and work details to the extent that is operationally possible. (WCSO 942.00 - Classification) If the WCSO restricts access to programs, privileges, education, or work opportunities, the WCSO shall document the following: The opportunities that have been limited; The duration of the limitation; and The reasons for such limitations. b. The facility shall assign inmates to Special Management housing only until alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of thirty (30) days. c. If involuntary Special Management housing assignment is made the WCSO shall document the following: The basis for the facility's concern for the inmate's safety; and The reason why no alternative means of separation can be arranged. d. Every thirty (30) days, the WCSO shall afford each inmate a review to determine whether there is a continued need for separation from the general population. The classification department will complete the 30-day assessment using page 2 of the PREA Incident Form (Attachment 5). e. Any use of Special Management housing to protect an inmate who is alleged to have suffered sexual abuse shall be subject to all above requirements.

Interviews with staff who regularly supervise special housing and the Superintendent both confirmed to the auditor that placement for an inmate who is alleged to have suffered sexual abuse has not occurred. The Superintendent reinforced that there are numerous options available to ensure a safe placement before use of special management. He noted that policy is in place should the options reviewed lead to that placement to ensure the provisions of the standard are met. See comments to 115.43.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The PAQ indicates they have not had to use restrictive housing to protect an inmate who is alleged to have suffered sexual abuse. The auditor found no reason to dispute this during the audit process.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Observations
- · Interviews investigative staff
- · Interview with the Court Officer
- · Interview inmates who reported a sexual abuse
- · Interview with the Superintendent
- Interview with the PREA Coordinator
- Investigative reports
- Retention schedule
- PAQ

PAQ indicates two substantiated allegations of conduct that appeared criminal were referred for prosecution since the last PREA audit. The auditor found no reason to dispute this during the audit process.

Policy - PREA states, All intentional acts of sexually abusive behavior or intimacy between an inmate and a Sheriff's Office employee, contractor or volunteer, or between an inmate and another inmate regardless of consensual status, are prohibited and the perpetrator shall be subject to administrative, criminal and/or disciplinary sanctions. The Sheriff's Office is committed to investigating, disciplining and referring for prosecution, Sheriff's Office employees, contractors, volunteers and inmates who engage in sexually abusive behavior.

Investigations / Evidence 1. The Special Services Division will investigate all allegations of sexual abuse and sexual harassment, including third party reports of sexual abuse and sexual harassment. These investigations shall be conducted promptly, thoroughly and objectively by a PREA trained investigator following U.S. Department of Justice, Office on Violence Against Women National Protocol for Sexual Assault Medical Forensic Examinations, 2d (April 2013) (PREA §115.71 (a-b)) All investigations shall be completed even if the alleged abuser or alleged victim is no longer employed at WCSO or is no longer in its custody. a. If it is determined that a crime may have been committed, the Special Services Division will contact the Worcester County District Attorney's office and shall begin a cooperative investigation with these agencies. 1) When evidence is collected at an outside hospital, the Investigating Officer(s) shall retain it. If the alleged perpetrator is a staff member, Special Services will contact the District Attorney's Office or local law enforcement agency to retain the evidence. 2) When the quality of the evidence appears to support criminal prosecution, compelled interviews will not be conducted without consulting with the District Attorney's office or local law enforcement. (PREA §115.71 (d)) 3) Any potential witnesses shall be interviewed in an attempt to corroborate the victim's statement or to identify suspect(s). Steps shall be taken to stop any retaliatory action including changing housing units or accelerated classification for possible transfer. 4) Credibility of an alleged victim shall be assessed on an individual basis and not determined by the person's status as inmate or staff; furthermore, WCSO shall not compel an inmate who alleges sexual abuse to submit to a polygraph examination or other truthtelling device as a condition for proceeding with the investigation of such an allegation. (PREA §115.71(e)) 5) The Special Services Division shall be trained to properly conduct sexual abuse complaints and will properly use Miranda and Garrity warnings. Investigators shall gather and preserve direct, circumstantial and DNA evidence and shall interview alleged victims, suspected perpetrators and witnesses. A review of prior complaints involving the suspected perpetrator shall be conducted. 6) The Special Services Division shall complete a written report, including a description of the physical and testimonial evidence, the reasoning behind the credibility assessments and the investigative findings. (PREA §115.71 (2)) August 2021 WCSO PREA - 16 7) Criminal investigations conducted by the Special Services Division shall include a written report that includes a thorough description of physical, testimonial and documentary evidence and shall have all documentary evidence attached when feasible. (PREA §115.71 (2)(g)) b. c. The Special Services Division shall make an effort to determine whether staff actions or failures to act contributed to the abuse. (PREA §115.72(f)(1)) d. All reports referenced in this section shall be retained as long as the alleged abuser is incarcerated or employed by the agency, plus five years. (PREA §115.72 (2)(i))

- (a) The investigators interviewed, and review of the investigations confirmed that investigators receive all referrals for all allegations of sexual abuse and sexual harassment. He confirmed that criminal investigations are referred to the Worcester County District Attorney. A Court Officer, who was interviewed, confirmed that he is the liaison for investigations that are criminally referred and is the one who remains informed of the progress.
- (b) All designated investigators receive training. See 115.34. Eleven certifications of this training were provided to the auditor for review
- (c) The interview with the investigator and review of the investigations confirmed that any relevant evidence is gathered to include physical, DNA, electronic monitoring data and interviews of all parties who may have relevant information. A data base is maintained to consult if there were prior investigations involving the individuals.
- (d) (e) The interview with the investigator confirmed that he concludes credibility on the collaborating evidence. He confirmed that polygraph or truth telling devices are not used. The investigator confirmed the District Attorney's office would be consulted before conducting compelled interviews. He relayed to the auditor that he frequently interviews inmates so that it is the normal course of business for inmates to be seen talking to him or his investigators.
- (f) The investigator confirmed that staff actions or failures are inherently part of every investigation. All investigations are organized in a standardized format. Investigations are maintained electronically in a data base only accessible by the authorized investigators.
- (g) (h) Criminal investigations can be conducted by the State Police Unit of the Worcester County Prosecutor's Office.
- (i) The auditor asked where and how evidence is maintained; the area was described to support that they are maintained in a secure area with limited, controlled access. This area is not accessible at the Jail and House of Corrections.
- (j) Many investigations reviewed did have the accused or accuser leave the facility, yet the investigation continued. Additionally, this was confirmed in the interview with the investigators.
- (I) If the state police investigate, the Court Officer confirmed that he is the main contact at the Sheriff's Office who remains informed of the progress of the investigation.

Summary of evidence to support a finding of compliance: As noted above, policy mandates compliance with the requirements of the standard. Thirty-one investigations were reviewed and demonstrated compliance with the standards. Interviews with the investigators confirmed compliance with all the provisions of the standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Policy - PREA
	· Interviews Investigative staff
	Review of investigations using preponderance of evidence (administrative)
	· Training curriculum SAIT
	Policy - PREA: The Special Services Division shall use a preponderance of the evidence standard when determining whether allegations of sexual abuse or sexual harassment are substantiated. (PREA §115.72)
	The interview with the investigators confirmed this, review of the administrative investigations supported this standard of evidence. Review of the training curriculum supports that a preponderance of evidence is used to determine when an allegation is substantiated, unsubstantiated or unfounded.
	Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Policy excerpts noted above as well as review of the investigations and interviews with the investigators support compliance with this standard.

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- · Observations of notifications
- · Interview Superintendent
- · Interviews with investigative staff
- · Interviews with inmates who reported a sexual abuse

The PAQ indicates that there were four criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months, four inmates were notified, verbally or in writing, of the results of the investigation. Zero allegations of inmate sexual abuse were completed by an outside agency in the past 12 months, two notifications that the inmate has been indicted on a charge related to sexual abuse.

Policy - PREA states, Response to Investigation, Notification, Review Panel, etc. 1. The Superintendent, Assistant Deputy Superintendent of Special Services and the PREA Coordinator shall review and assess all reports regarding instances of sexually abusive behavior within seventy-two (72) hours. The Special Services Division will produce an investigative report within thirty (30) days of the incident unless the time is extended by the Superintendent or the PREA Coordinator. 2. Following an investigation into an inmate's allegation that the inmate suffered sexual abuse, the agency shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. (Notice of PREA Findings - Attachment 10) (PREA §115.73 (a) If the agency did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the inmate. (PREA §115.73 (b)) a. Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: 1) The staff member is no longer posted within the inmate's unit; 2) The staff member is no longer employed at the facility; 3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or 4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. (PREA §115.73 (c)(1-4)) b. Following an inmate's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: 1) The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or 2) The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (PREA §115.73 (d)(1-2)) c. All such notifications or attempted notifications shall be documented. (PREA §115.73 (e)) (Inmate Notification (Inmate) - Attachment 11 or Inmate Notification (Staff) - Attachment 12) d. An agency's obligation to report under this standard shall terminate if the inmate is released from the agency's custody. (PREA §115.73 (f))

The auditor reviewed the Attachments developed to address this standard and concluded that they do ensure that the inmate is informed as required by the provisions, as all requirements are addressed. Two completed notifications to an inmate were provided with the pre-audit documentation. The interview with the investigator support that this is the obligation of the investigator to complete the notification. He indicated that practice is to complete them for all allegations. The auditor observed during the review of all investigations that they included a copy of the memo of notification to the offender. Two inmates were interviewed who had been involved in a sexual abuse/harassment allegation and confirmed to the auditor that they were informed of the results. Other notifications were not completed as the inmate was no longer housed at the facility.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. Policy excerpts demonstrate compliance with the requirements. The attachments ensure that the requirements are reflected in the notification. The interview with the investigator and observations of the notices provided sufficient evidence to support a finding of compliance.

115.76 Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: Policy - PREA Observations PAQ Interview with the Sheriff Interview with the Superintendent The PAQ indicates that no staff have been terminated, nor referred to licensing bodies for violating agency sexual abuse and/or sexual harassment policy. The auditor found no reason to dispute this during the audit process. Policy - PREA states, Allegations Against Staff, Contractors or Volunteers Any staff member who is accused of sexually abusive behavior shall be placed on "no inmate contact" status or administrative leave pending an investigation. Staff members who are contractors or volunteers shall be barred from the facility until the completion of the investigation. 1. All WCSO staff, contractors, or volunteers shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. 2. If the investigation determines that any staff member retaliated against staff or an inmate for reporting sexually abusive conduct, they will be disciplined up to and including termination. 3. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. (a) (b) (c) (d) Dialogue with the Superintendent, investigators, and PREA Coordinator support that all allegations against staff for sexual abuse, sexual harassment, retaliation or neglect are investigated and disciplinary action would be commensurate with the circumstances up to termination for sexual abuse. Review of the investigations supported that any allegation of staff sexual misconduct is referred immediately to the Internal Affairs Division. Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The PAQ notes that no staff have been terminated for sexual abuse or sexual harassment towards an inmate in the past 12

months. The auditor found no evidence to dispute this during the audit process. This conclusion was additionally based on formal and informal interviews with staff. Interviews with the Sheriff and Superintendent support that these requirements will

be followed.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:
	· Policy - PREA
	· Interviews Superintendent
	· PAQ
	The PAQ notes that no contractor or volunteer has been involved in an investigation regarding sexual abuse or sexual harassment towards an inmate. The auditor found no evidence to dispute this statement during the audit process.
	Policy - PREA states, E. Allegations Against Staff, Contractors or Volunteers Any staff member who is accused of sexually abusive behavior shall be placed on "no inmate contact" status or administrative leave pending an investigation. Staff members who are contractors or volunteers shall be barred from the facility until the completion of the investigation. 1. All WCSO staff, contractors, or volunteers shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. 2. If the investigation determines that any staff member retaliated against staff or an inmate for reporting sexually abusive conduct, they will be disciplined up to and including termination.
	Summary of evidence to support a finding of compliance: Policy excerpts quoted above meet the requirements of the standard. The PAQ notes that no volunteers or contractors have been terminated for sexual abuse or sexual harassment towards an inmate in the past 12 months. The auditor found no evidence to dispute this during the audit process. Interviews with the Superintendent supported that these requirements will be followed.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy PREA
- Observations
- Interviews Superintendent
- Interview with the disciplinary officer
- · Interview with the Mental Health Director
- Inmate Handbook
- · PAQ

The PAQ indicates there have been four administrative findings one criminal findings of inmate-on-inmate sexual abuse.

Policy - PREA states, All intentional acts of sexually abusive behavior or intimacy between an inmate and a Sheriff's Office employee, contractor or volunteer, or between an inmate and another inmate regardless of consensual status, are prohibited and the perpetrator shall be subject to administrative, criminal and/or disciplinary sanctions. The Sheriff's Office is committed to investigating, disciplining and referring for prosecution, Sheriff's Office employees, contractors, volunteers and inmates who engage in sexually abusive behavior.

The Inmate Handbook provides information on disciplinary violations, offenses, informal/formal proceedings for minor offense, formal proceedings for major offenses and the sanctioning schedule.

Disciplinary violations relating to sexual abuse or harassment include the following:

Fighting with, assaulting, or threatening another inmate.

Obscene /abusive / threatening language.

Engaging in unauthorized sexual acts.

Indecent exposure

Spitting, throwing of objects, materials, liquids, bodily excretions at another.

The Inmate Handbook additionally states, DISCIPLINARY PROCEDURES In order for this facility to maintain order and discipline, a set of rules and regulations dealing with inmate conduct has been established. This section will inform you of the rules in this facility governing your conduct as well as the penalties which may be imposed for violation of those rules. In general, all rule violations shall be handled through the staff Disciplinary Officer. However, if you are alleged to have committed a crime, your case will be referred to the Special Services Department for possible prosecution. If the initial investigation of the charges determines that formal disciplinary action is required, you will be notified that you must appear before the Hearing Officer.

Any inmate who is unable to comprehend the rules and regulations will be provided assistance. The following are the categories, the offenses found in each and the sanctions that may be imposed by the Disciplinary staff for any rule violation. The following acts are prohibited; commission by an inmate shall constitute a disciplinary offense: # ACT Minor Major Fighting with, assaulting or threatening another inmate X (18B) Fighting with, assaulting or threatening another person X Spitting, throwing of objects, materials, liquids, bodily excretions at another X X (20) Engaging in sexual acts with others. (32) Violating any law of the Commonwealth of Massachusetts or the United States. X (33) Attempting to commit any of the above offenses, making plans to commit any of the above offenses or aiding another person to commit any of the above offenses shall be considered the same as the commission of the offense itself.

Sanctions Upon Finding of Guilty: Upon a finding of guilty, the Hearing Officer may impose any of the sanctions singularly or in combination as categorized below; however, the sanctions shall be reasonably related to the severity of the offense(s).

The Inmate Handbook and policy support that formal discipline will be conducted if there is a substantiated allegation of sexual abuse or sexual harassment on another inmate. The interview with the disciplinary coordinator and Superintendent confirmed to the auditor that sanctions would be commensurate with the nature and circumstances of the offense. The

interview with the disciplinary coordinator and the Mental Health Director confirmed that an inmate's mental status would be reviewed prior to determining disciplinary sanctions. The interview with the Mental Health Director confirms that her staff could work with an individual individually to address these issues, if he was willing. It would not be a requirement for release. The interview with the disciplinary coordinator confirmed that an inmate would not be sanctioned for sexual contact with a staff unless the staff member did not consent to the contact.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The interview with the Superintendent supported those sanctions are proportionate to the nature and circumstance and mental disability/illness is considered when determining sanctions in accordance with policy. The interview with the Mental Health Director supports that the inmate will be referred for appropriate counseling if found guilty of a sexual misconduct The interview with the disciplinary officer confirmed compliance with provisions (b), c) and (e). Based on analysis of the evidence, the auditor finds the facility to be compliant with the requirements of this standard.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- Policy 940.01 Admission and Orientation
- · Policy 932.13 Mental Health Services and Suicide Prevention
- Medical/mental health intake
- Observations of the intake process
- · Interviews Inmates who disclose sexual victimization at risk screening
- · Interview staff responsible for risk screening
- · Interview medical and mental health staff
- Document's showing limited information to custody staff
- · PAQ

The PAQ indicates that 100% of inmates who disclosed prior victimization during screening who were offered a follow up meeting with medical/mental health practitioner.

Policy 940.01 Admission and Orientation: Mental Health Screening - All new inmates shall receive an initial mental health screening by a qualified health care professional in accordance with 932.13 Mental Health and Suicide Prevention.

Policy 932.13 Mental Health Services and Suicide Prevention MENTAL HEALTH ADMISSION SCREENING PROCESS A. Initial Mental Health Screening: 1. All inmates shall receive an initial mental health screening at the time of admission by mental health staff during normal business hours. After normal business hours, a qualified medical professional will conduct the screening, and mental health staff will complete a second screen on the next business day. 2. This procedure shall provide for referring inmates, who are severely disturbed and/or with intellectual disabilities, for placement in either appropriate noncorrectional facilities or in specially designated units for handling the individual.

INDIVIDUALIZED TREATMENT PLANS A. After the evaluation has been completed, if an inmate is found to be in need of services the Qualified Mental Health Professional shall develop an Individualized Treatment Plan to be documented in the electronic medical record. The plan will include: 1. An assessment of current status and person specific circumstances. 2. A review of available historical records, and use of additional assessment tools as indicated. 3. Recommend accepted interventions, treatment interventions and frequency of follow up needed.

Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Medical and Mental Health intake form assess the following: Victim of sexual abuse, perpetrator of sexual abuse, arrested for sex offense, fist arrest, mental or developmental disability, ADA needs, identify as transgender, intersex or gender non-conforming, present as gay or bisexual, assessment of feeling vulnerable, small stature, detained solely for civil immigration, able to read and write, need for referral.

Sign agreeing to the following: I understand that Medical/Mental Health Staff are mandated reports and are required to report immediately any knowledge, suspicion or information pertaining to an incident of sexual abuse or sexual harassment that occurred within the facility; and with my consent any victimization that occurred in the community, unless I am a minor and then health staff are mandated reporters.

Mental Health Intake: Are you concerned you might be physically or sexually abused or assaulted by someone while you are here?

Have you ever been a victim of sexual abuse

Are you concerned you might try to physically or sexually abuse or assault someone while ou are here

Have you ever sexually abused or assaulted anyone. A yes to any question will be referred to MH for evaluation.

- (a) (b) This is not applicable to this facility as it is a jail.
- (c) The auditor observed the intake process. The risk assessment is conducted at intake along with medical and mental health staff who also conduct an intake; both inquire about prior sexual victimization. Referrals to mental health are made automatically during this process.
- (d) The auditor was provided the secure medical and mental health information from the intake process. Two examples for the last thirteen months. They reflected the process as described in the policy.
- (e) Medical and mental health staff are trained to obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting. This was confirmed during the interviews with medical and mental health staff. This is reviewed and signed by the inmate during the intake process.

Summary of evidence to support a finding of compliance: Review of policy, interviews with staff, including medical and mental health staff support a finding of compliance. As all inmates are reviewed by medical and mental health staff at intake, the notation of prior victimization has been addressed at the initial intake encounter. Inmates wanting to receive further mental health assistance are placed on the caseload and assessed and provided treatment according to their needs. Medical and mental health staff confirmed they obtain informed consent by having the inmate sign a form acknowledging consent if making a referral outside the agencies related to prior victimization this during the intake process for inmates over the age of 18. Information gleaned from these assessments is maintained in the electronic medical record, in which access is controlled by privacy laws, with staff outside of the medical/mental field have to be granted authorization to the record. Documentation demonstrating the process was provided to the auditor providing further evidence of compliance.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Observations made during the tour
- · Interviews medical and mental health staff
- Response Plan for Sexual Assault

Policy - PREA states, Intervention / Medical and Mental Health Services 3. The alleged inmate victim shall be taken to the Inmate Health Services Unit for emergency medical care and mental health treatment. (PREA §115.82(a)) a. Inmates who are possible victims of sexual abuse shall be offered tests for sexually transmitted diseases as needed. (PREA §115.82(c)) · The tests cited shall be offered regardless of whether the inmate cooperates with an investigation. b. Inmates who are the victims of sexual abuse shall be offered medical and mental health evaluations and treatment services. These evaluations shall include access to Pathways Advocate services, follow up services, treatment plans and referrals for continued care even when the inmate is no longer in the facility. Furthermore, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. (PREA §115.83(b)) c. Upon initiation of services, medical providers shall inform the inmates of their duty to report and the limitation of confidentiality unless otherwise precluded by law. d. A medical staff member shall evaluate and document the extent of the physical injury and provide emergency treatment as needed. e. A determination of possible referral to an outside hospital with a rape crisis unit shall be made by the operations captain in conjunction with medical staff. If the determination is made that the inmate should be sent to an outside hospital and the inmate victim consents, the alleged victim shall meet with a Sexual Assault Nurse Examiner (SANE) where they will receive preventative treatment. f. Upon return from the outside hospital, the inmate victim shall be brought to the Health Services Unit for appropriate follow up care including a mental health screening from the Mental Health staff. If after normal business hours the medical staff will conduct the screening and alert the Mental Health staff for follow up as soon as possible. g. If the inmate victim is at risk of harming himself, he will be seen immediately by the Mental Health staff. Otherwise, the inmate shall be seen no later than the next business day. h. The inmate shall be allowed to refuse rape crisis intervention treatment. In such cases, the mental health staff shall attempt to discuss the options that the inmate has to receive treatment. If this discussion is unsuccessful, a Refusal of Treatment form (Attachment 8) shall be signed by the inmate. i. Provisions shall be made for testing for sexually transmitted diseases. j. The Department will attempt to maintain a memorandum of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse. k. This facility does not currently house female inmates but does on occasion transport them for numerous reasons. It should be noted that if: An inmate is the victim of sexually abusive vaginal penetration while incarcerated they shall be offered pregnancy tests and if pregnancy results the alleged sexual abuse, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. (PREA §115.83 (d-e)) I. All services provided to an alleged victim shall be done at no cost to the alleged victim, regardless of whether they cooperate with the investigation or name their alleged abuser. (PREA §115.83 (g))

WCSO Response Plan for Sexual Assault: A medical staff member shall evaluate and document the extent of the physical injury and provide emergency treatment as needed. i. A determination of possible referral to an outside hospital with a rape crisis unit shall be made by the operation captain in conjunction with medical staff. j. If the determination is made that the inmate should be sent to an outside hospital and the inmate victim consents, the alleged victim shall meet with a Sexual Assault Nurse Examiner (SANE) where he will receive preventative treatment. k. Upon return from the outside hospital, the inmate victim shall be brought to the Health Services Unit for appropriate follow up care including a mental health August 2021 WSCO – PREA Response Plan - 3 screening from the Mental Health staff. If after normal business hours the medical staff will conduct the screening and alert the Mental Health staff for follow up as soon as possible. I. If the inmate victim is at risk of harming himself, the inmate will be seen immediately by the Mental Health staff or placed on Pending Mental Health Assessment. Otherwise, the inmate shall be seen no later than the next business day. m. The inmate shall be allowed to refuse rape crisis intervention treatment. In such cases, the mental health staff shall attempt to discuss the options that the inmate has to receive treatment. If this discussion is unsuccessful, a Refusal of Treatment form (Attachment 3) shall be signed by the inmate.

- (a) (b) It was reported that medical staff are on duty 24 hours a day, seven days a week. The auditor found this credible. Policy requires that they be immediately notified if a report of sexual abuse is made. The response plan additionally ensures that all victims of sexual abuse are evaluated by the medical staff, regardless of the details of the incident.
- (c) Policy supports the requirement of the standard. The interview with the Health Services Administrator additionally confirmed that inmate victims shall be offered timely information and access to prophylactic treatment for sexually transmitted

diseases.

(d) Policy and the interview with the Health Services Administrator confirmed that treatment would be free and not based on whether the alleged victim cooperates with the investigation.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The interview with the health services supervisor confirmed that the provisions included in the policy would occur. Therefore, the auditor found there is sufficient evidence to support a finding of compliance.

Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Observations made during the tour
- Interviews medical and mental health staff
- Facility Coordinated Response Plan

Policy - PREA states, Intervention / Medical and Mental Health Services b. Inmates who are the victims of sexual abuse shall be offered medical and mental health evaluations and treatment services. These evaluations shall include access to Pathways Advocate services, follow up services, treatment plans and referrals for continued care even when the inmate is no longer in the facility to include referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody. (PREA §115.83(b)). This facility does not currently house female inmates, but does on occasion transport them for numerous reasons. It should be noted that if: · An inmate is the victim of sexually abusive vaginal penetration while incarcerated they shall be offered pregnancy tests and if pregnancy results the alleged sexual abuse, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services. (PREA §115.83 (d-e)) I. All services provided to an alleged victim shall be done at no cost to the alleged victim, regardless of whether they cooperate with the investigation or name their alleged abuser. (PREA §115.83 (g))

- (a) (b) (c) (d) Policy supports the requirement of the standard. The interview with the health services supervisor confirmed that the evaluation and treatment of such victims shall 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 occur. If not being transferred to another facility, treatment and follow up services would be arranged along with other medical needs during discharge planning. She additionally confirmed that services would be consistent with community level of care.
- (f) (g) Policy and interview with the Health Service Administrator confirm that the inmate would not be charged for these services, testing and treatment for sexually transmitted infections may begin at the hospital or at the facility. Either way, this treatment would be provided.
- (h) This is not applicable to this facility as it is a jail.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. There was no reported incident that warranted post sexual abuse treatment in the previous 12 months as reported by the facility. The auditor found this information credible.

115.86 Sexual abuse incident reviews Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: Policy - PREA Sexual Abuse incident Reviews Interview with members of the Sexual Abuse Incident Review Team Interview with the Superintendent PAQ The PAQ states there have been five criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. Policy - PREA states, A Critical Incident Review Committee shall be formed after the investigation is complete and will review the incident to conduct a critical assessment of the Department's response. The Superintendent shall select the members of this Committee. The Review Board will review the case and make a critical assessment of the facility's response. A report of the Panel's findings and recommendations will be submitted to the Superintendent for appropriate action. (a) (b) (c) (d) (e) Interviews with members of the review team (investigator, and the PREA Coordinator) confirmed that the requirements of the standard are all considered when conducting the review. Sexual Abuse Incident Review meeting minutes were reviewed. They addressed all aspects of the standard provision. Team members and titles were listed, reflecting that the appropriate staff attend the meetings. The date reflected the meeting was held within 30 days of the conclusion of the investigation. Additional areas reviewed include the following: review of risk assessments, review of referral to medical/mental health process, actions taken (ie were inmates moved), is a change to policy or procedure indicated, was it necessary to notify a licensing body), was it referred for prosecution/criminal, charges filed?. Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards.

PREA incident reviews address all provisions of the standard. The interview with members of the incident review team

confirmed that the provisions are met and addressed.

115.87 Data collection

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:

- · Policy PREA
- Interview with members of the Sexual Abuse Incident Review Team
- · Interview with the Superintendent
- SSV form
- Last SSV requested by the DOJ

Policy - PREA states, Data Collection / Analysis 1. The Special Services Division shall collect accurate, uniform data for every allegation of sexual abuse. This data will be maintained for at least ten (10) years after the date of the initial collection unless Federal, State, or local law requires otherwise 2. The WCSO shall review the data on these allegations at least annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The WCSO will prepare an annual report of its finding and corrective actions for the facility. This report shall be approved by the Superintendent and be made available to the public through its website. 3. The Special Services Division shall make all aggregated sexual abuse data readily available to the public at least annually through the WCSO website. 4. Documentation of all incidents or allegations of sexually abusive behavior shall be recorded to ensure a source for historic data. 5. A list of all known victims and predators shall be developed and monitored by the Classification division. 6. A procedure to monitor the behavior of known victims and predators shall be developed.

DEFINITIONS Allegation - An oral, written or electronic statement that sexual abuse has occurred or might occur that is provided to a staff member or outside agency. Critical Incident Review Board - A multi-disciplinary panel of senior managers who routinely meet to review major incidents that occur inside the Worcester County Sheriff's Department and the Sheriff's Office. Credibility Assessment - An investigator's process of conducting interviews and weighing evidence to determine the truthfulness of victim, witness, and suspect statements. Gender Expression - A person's expression of their gender identity including appearance, dress, mannerisms, speech, and social interactions. Gender Identity - A person's internal, deeply felt sense of being male or female, regardless of the person's sex at birth. Gender Nonconforming - A person whose appearance or manner does not conform to traditional societal gender expectations. Intersex - A person who's sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development. LGBTI Population - Acronym for lesbian, gay, bi-sexual, transgender, and intersex inmates. Need to Know- A criterion for limiting access of certain information to individuals who require the information to make decisions or take action with regard to an inmate's safety or treatment or to the investigative process. PREA - Prison Rape Elimination Act - Federal Legislation (Public Law No. 108-79), enacted in 2003, to provide for the analysis of the incidence and effects of prison rape in federal, state, and local institutions and to provide information, resources, recommendations, and funding to protect individuals from prison rape. PREA Coordinator - A person assigned/appointed by the Superintendent who coordinates the WCSO compliance with the Department of Justice's (DOJ) Rule on the National Standards to prevent, detect, and respond to prison rape pursuant to the Prison Rape Elimination Act of 2003 (PREA). 4 SANE (Sexual Assault Nurse Examiner) Program - Delivers coordinated expert forensic and medical care necessary to increase successful prosecution of sex offenders and to assure essential medical intervention to victims of assault who are examined at SANE designated emergency hospitals. Inmate / Inmate Sex Acts - Sexual abuse of an inmate, detainee, or resident by another inmate, detainee, or resident includes any of the following acts, if the victim does not consent, is coerced into such act by overt or implied threats of violence, or is unable to consent or refuse: · Contact between the penis and the vulva or the penis and the anus, including penetration, however slight; · Contact between the mouth and the penis, vulva, or anus; · Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument. Inmate / Inmate Sexual Abuse - Contact of any person without their consent, or of a person who is unable to consent or refuse; and intentional touching, either directly or through the clothing, of genitalia, anus, groin, breast, inner thigh, or buttocks of any person. Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation. Inmate / Inmate Sexual Harassment - Sexual Harassment includes- Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one inmate, detainee, or resident directed towards another. Written or verbal communications, gestures such as simulated acts of a sexual nature. Staff Sexual Misconduct - Sexual abuse of an inmate, detainee, or resident by a staff member, contractor, or volunteer includes any of the following acts, with or without consent of the inmate, detainee, or resident: · Contact between the penis and the vulva or the penis and the anus, including penetration, however slight; · Contact between the mouth and the penis, vulva, or anus; · Contact between the mouth and any body part where the staff member, contractor, or volunteer has

the intent to abuse, arouse, or gratify sexual desire; Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire; Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or where the staff member, contractor, or volunteer has the intent to abuse, arouse, or gratify sexual desire; · Any attempt, threat, or request by a staff member, contractor, or volunteer to engage in the activities described within this section; aff member, contractor, or volunteer. · Voyeurism by a staff member, contractor, or volunteer means an invasion of privacy of an inmate, detainee or resident by staff for reasons unrelated to official duties, such as peering at an inmate who is using a toilet in their cell to perform bodily functions; requiring an inmate to expose their buttocks, genitals or breasts; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions. Staff / Inmate Sexual Harassment -Repeated verbal comments or gestures of a sexual nature to an inmate, detainee, or resident by a staff member, contractor, or volunteer, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures. Written or verbal communications, gestures such as simulated acts of a sexual nature. Staff - Any employee, contractor, intern or volunteer of the Department. Transgender - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth. Substantiated Allegation - An allegation that was investigated and determined to have occurred. Unfounded Allegation - An allegation that was investigated and determined not to have occurred. Unsubstantiated Allegation - An allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred. Victim Advocate - A Community Service provider (Pathways for Change Inc.) that will provide inmates with confidential emotional support services related to sexual abuse. This service will be provided at the hospital.

The interview with the PREA Coordinator confirmed that he last received a request for the Survey on Sexual Victimization in 2018. A copy was provided to the auditor. He utilizes the SSV form to collect data in addition to the definitions noted in policy, consistent with the definitions provided by the Department of Justice. This facility does not use a private facility for the confinement of its inmates. He states he collects data from investigations, risk assessments and incident reviews.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The interview with the PREA Coordinator provided additional evidence to support a finding of compliance. Definitions are consistent with those provided with the standards. The last SSV was provided to the auditor reflecting compliance with the request. Therefore, the auditor finds there is sufficient evidence to support a finding of compliance.

115.88 Data review for corrective action Auditor Overall Determination: Meets Standard **Auditor Discussion** The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard: Policy - PREA Observations Interview with the Sheriff Interview PREA Coordinator Link to website Prison Rape Elimination Act Annual Report Policy - PREA states, Data Collection / Analysis 1. The Special Services Division shall collect accurate, uniform data for every allegation of sexual abuse. This data will be maintained for at least ten (10) years after the date of the initial collection unless Federal, State, or local law requires otherwise 2. The WCSO shall review the data on these allegations at least annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The WCSO will prepare an annual report of its finding and corrective actions for the facility. This report shall be approved by the Superintendent and be made available to the public through its website. 3. The Special Services Division shall make all aggregated sexual abuse data readily available to the public at least annually through the WCSO website. 4. Documentation of all incidents or allegations of sexually abusive behavior shall be recorded to ensure a source for historic data. 5. A list of all known victims and predators shall be developed and monitored by the Classification division. 6. A procedure to monitor the behavior of known victims and predators shall be developed. The interview with the Sheriff confirmed that incident based sexual abuse data is used to assess and improve prevention, detection and response policies. He confirmed that he does approve the reports. It is also available of the facility website. Review of the report indicated that no redactions were required.

Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The annual report is located on the website. Assessment of comparisons reveal little information but affirms that allegations are low, supporting that staff excel at prevention in the facility. The interview with the Sheriff supports the process and use of the information. The report compares statistics from 2020 to 2021. There is an analysis of possible trends, identification of problems areas and corrective actions.

115.89	Data storage, publication, and destruction	
	Auditor Overall Determination: Meets Standard	
	Auditor Discussion	
	The auditor reviewed, gathered, analyzed and/or retained the following evidence related to this standard:	
	· Policy - PREA	
	· Interviews PREA Coordinator	
	· Documentation that it is on the website	
	· Historical data since 2015	
	Policy - PREA states, Data Collection / Analysis 1. The Special Services Division shall collect accurate, uniform data for every allegation of sexual abuse. This data will be maintained for at least ten (10) years after the date of the initial collection unless Federal, State, or local law requires otherwise 2. The WCSO shall review the data on these allegations at least annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The WCSO will prepare an annual report of its finding and corrective actions for the facility. This report shall be approved by the Superintendent and be made available to the public through its website. 3. The Special Services Division shall make all aggregated sexual abuse data readily available to the public at least annually through the WCSO website. 4. Documentation of all incidents or allegations of sexually abusive behavior shall be recorded to ensure a source for historic data. 5. A list of all known victims and predators shall be developed.	
	Summary of evidence to support a finding of compliance: Policy reflects compliance with the provisions of the standards. The interview with the PREA Coordinator supports that data is securely maintained and will be maintained for the required 10 years. In addition, data is available on the website for the years 2016, 2017, 2018, 2019, 2020 and 2021.	

Based on the above, the auditor finds this standard to be in compliance.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility is audited every three years. Reports on located on their web page. This is the only facility for the agency. The auditor was able to interview anyone selected, privately. Two letters were received; interviews were conducted with those that sent the letters, the auditor confirmed through interviews with mailroom staff that they are mailed in the same manner as letters sent to legal counsel.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The previous report is available for review on the agency website.

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

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
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, except in exigent circumstances? (N/A if the facility does not have female inmates.)	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 if the facility does not have female inmates.)	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 (N/A if the facility does not have female inmates)?	na

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

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

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

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.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

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
Policies to ensure referrals of allegations for investigations	
If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
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
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
	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? Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Does the agency document all such referrals? Policies to ensure referrals of allegations for investigations If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(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? 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? Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retallation for reporting sexual abuse and sexual harassment? Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? 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? Does the agency train all employees who may have contact with inmates on how to common reactions of sexual abuse and sexual harassment victims? Does the agency train al

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

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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
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115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d) (8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	na
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	na
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	na
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 any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
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115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

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 (I)	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 an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

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

115.82 (c)	Access to emergency medical and mental health services		
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes	
115.82 (d)	Access to emergency medical and mental health services		
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes	
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes	
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes	
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes	
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes	
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes	
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers		
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na	
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.)	na

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

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