

# PREA Facility Audit Report: Final

**Name of Facility:** Elmwood Correctional Center for Women

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 08/25/2017

**Date Final Report Submitted:** 03/05/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Eric Woodford	<b>Date of Signature:</b> 03/05/2018

AUDITOR INFORMATION	
<b>Auditor name:</b>	Woodford, Eric
<b>Address:</b>	
<b>Email:</b>	eiw@comcast.net
<b>Telephone number:</b>	
<b>Start Date of On-Site Audit:</b>	07/25/17
<b>End Date of On-Site Audit:</b>	07/27/17

FACILITY INFORMATION	
<b>Facility name:</b>	Elmwood Correctional Center for Women
<b>Facility physical address:</b>	701 S. Able, Milpitals, California - 95035
<b>Facility Phone</b>	4089575832
<b>Facility mailing address:</b>	
<b>The facility is:</b>	<input checked="" type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
<b>Facility Type:</b>	<input type="radio"/> Prison <input checked="" type="radio"/> Jail

Primary Contact			
<b>Name:</b>	Deputy Bravo	<b>Title:</b>	PREA Manager
<b>Email Address:</b>	erica.bravo@shf.sccgov.org	<b>Telephone Number:</b>	4088083692

Warden/Superintendent			
<b>Name:</b>	Timothy Davis	<b>Title:</b>	Correctional Captain
<b>Email Address:</b>	timothy.davis@shf.sccgov.org	<b>Telephone Number:</b>	408-957-5303

Facility PREA Compliance Manager			
<b>Name:</b>	Erica Bravo	<b>Email Address:</b>	erica.bravo@shf.sccgov.org

Facility Health Service Administrator			
<b>Name:</b>	Matthew Gerrior	<b>Title:</b>	Director of Nursing
<b>Email Address:</b>	matthew.gerrior@hhs.sccgov.org	<b>Telephone Number:</b>	408-808-5253

Facility Characteristics		
<b>Designed facility capacity:</b>	825	
<b>Current population of facility:</b>	463	
<b>Age Range</b>	Adults: 18-55+ (range)	Youthful Residents:
<b>Facility security level/inmate custody levels:</b>	Minimum to Maximum Security	
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	267	

AGENCY INFORMATION	
<b>Name of agency:</b>	Santa Clara County Custody Bureau
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	180 W.Hedding, San Jose, California - 95110
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

Agency Chief Executive Officer Information:			
<b>Name:</b>		<b>Title:</b>	
<b>Email Address:</b>		<b>Telephone Number:</b>	

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Christine Nagaye	<b>Email Address:</b>	christine.nagaye@shf.sccgov.org



## AUDIT FINDINGS

### **Narrative:**

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

### NARRATIVE

The Elmwood Women's Facility On-Site PREA Audit was conducted from 7/25/17 through 7/27/17. The following processes were conducted during the Pre-Audit phase:

5/23/17 - The Auditor provided the Agency the Pre-Audit Questionnaire (PAQ), Audit Process Map, PREA Audit Checklist and Instructions for PREA Audit Tour. Agency decided to complete the PAQ utilizing the PREA Online Audit system.

5/25/17 - Auditor provided the Agency with the Notice of Auditor poster language in English & Spanish and Pre-Audit and On-Site Audit Timeline for review and action by the PREA Coordinator to be placed in all general areas of the facility with access by both inmates and staff no later than 6/13/17.

6/7/17 - Auditor requested Agency provide list of inmates, staff, volunteers and contractors assigned to the facility for random selection by Auditor to review Personnel, Training, Investigative, Screening, Medical and Mental Health documentation. Agency provided Auditor with the requested lists on 6/13/17

6/13/17 - Notices of the Audit were posted in general areas of the facility accessible to both residents and staff. Notices were posted in both English and Spanish. The PREA Coordinator provided auditor with dated photos and list of Notice location placement.

6/15/17 - the Auditor submitted random selections of 21 inmates, 20 staff, 4 Volunteer and 4 Contractors from the lists provided and requested the random selection of Personnel, Training, Investigative, Screening, Medical and Mental Health documentation be submitted to the Auditor for review on 6/27/17.

6/19/17 - Agency provided the requested documentation for Auditor review.

7/9/17 - Auditor completed document review.

6/20/17 - PREA Coordinator provided Auditor with the PAQ and supporting documentation. Auditor and PREA Coordinator communicated throughout the Pre-Audit phase to discuss issues identified within the Pre-Audit Questionnaire and to correct deficiencies and provide clarification prior to the On-Site Audit Phase.

7/17/17 – Auditor requested sexual misconduct reporting information from Just Detention International (JDI).

7/17/17 – Auditor sends Pre-Audit Issue Paper to PREA Coordinator for review and response by 8/4/17

7/17/17 - Auditor provided the On-Site Audit Timeline and requested a roster of all Elmwood Women's Facility inmates and roster of all staff from each of the three shifts scheduled to work during the on-site audit in order to make random selections of staff and residents for interviews. Roster Lists are to be submitted to Auditor by 7/19/17.

7/19/17 - Auditor received staff and inmate rosters from Agency to conduct random selections for interviews.

7/21/17 - Auditor submitted random selection of staff and inmates for On-Site Audit interviews.

7/21/17 - Auditor contacted YWCA Rape Crisis Center to interview Director. Staff available 24/7 & provides support as outlined in MOU with Santa Clara County Sheriff Department. Auditor also contacted

Just Detention International. There is no record of any allegations of sexual abuse received from Santa Clara County Jail Elmwood women's Facility.

The On-Site audit phase began on 7/25/17 with the entry briefing. Attendees included the Elmwood Complex Commander, PREA Coordinator, PREA Manager, Elmwood Women's Facility Lieutenant, and Elmwood Women's Facility Sergeant, and administrative staff. A summary of the complete Audit process was explained. The Pre-Audit, On-Site Audit, Post-Audit and Corrective Action phases were explained and discussed. Auditor went into detail explaining how an auditor conducts each stage of the On-Site audit process. All questions were answered and the physical plant review began. The Elmwood Women's Facility contains 3 housing unit buildings. Two buildings are divided into 3 to 5 housing pods. The 3rd building has 2 open dorms and linear cell configuration in the back. The facility includes the facility laundry, medical clinic, mental health offices, processing/intake area, food preparation and storage areas, contact and non-contact visiting, attorney visiting, administrative and ancillary offices. Total resident population at time of physical plant review was 442 inmates. The Santa Clara County Elmwood Women's Facility houses only female inmates. Physical Plant Review was conducted as follows:

Living Unit: W-2 Building – Unit PODs F, E, & D – Minimum Supervision Inmates

PREA Information Posted: Yes, PREA Posters in each Unit located in bulletin board panel case to include Notice of Auditor posters

Opposite Sex Viewing: None

Camera Placement? 2 cameras in control area viewing Control Booth

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): 2 deputies manning control. 1 female deputy & 1 male deputy for each shift. Never 2 male deputies assigned to supervise the housing units.

General Discussion with Inmates (Not Interviews): Inmate states she feels sexually safe in the facility and trusts the staff in the event she needs to report allegations of sexual abuse.

Phones: Yes, inside each POD

Grievance Process: Grievance lock box located in each POD with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: both compliant with doors. Deputies can view neck up and knees down for security purposes.

Recreation Areas/TV/Multi-Purpose: Open area in each POD for recreation & tv. Inmates have access to outdoor recreation area, access to library with PREA posters and Notice of Auditor posters.

Living Unit: W-2 Building Side #1 – Unit PODs A, B, & C – Minimum Supervision Inmates

PREA Information Posted: Yes, PREA Posters in each Unit located in bulletin board panel case to include Notice of Auditor posters.

Opposite Sex Viewing: None

Camera Placement? 2 cameras in control area viewing Control Booth

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): None

General Discussion with Inmates (Not Interviews): Inmate states she has the ability to program and attend education should she choose.

General Discussion with Staff (Not Interviews): Male deputy conducted welfare check in female POD and announced presence prior to entering the POD. Deputy also recited 1st Responder responsibilities.

Phones: Yes, inside each POD

Grievance Process: Grievance lock box located in each POD with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: both compliant with doors. Deputies can view neck up and knees down for security purposes.

Recreation Areas/TV/Multi-Purpose: Open area in each POD for recreation & tv. Inmates have access to outdoor recreation area, library where PREA Posters and Notice of Auditor Posters are placed.

Living Unit: W-4 Building POD A - Maximum Supervision Inmates

PREA Information Posted: Yes, in hallway leading to each Unit. Located in Unit bulletin board panel case, near phones and in multi-purpose room to include Notice of Auditor

Opposite Sex Viewing: None

Camera Placement? 2 cameras in control area viewing Control Booth

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): 2 female deputies manning control. Only female deputies assigned for each shift.

General Discussion with Inmates (Not Interviews): None

Phones: Yes, inside the POD in open general area

Grievance Process: Grievance lock box located in POD with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: both compliant with doors. Deputies can view neck up and knees down for security purposes.

Recreation Areas/TV/Multi-Purpose: Open area in POD for recreation & tv. Inmates have access to outdoor recreation area.

Living Unit: W-4 Building – POD B – Medium Supervision Inmates

PREA Information Posted: Yes, in 3 languages located in bulletin board panel case and multi-purpose room to include Notice of Auditor

Opposite Sex Viewing: None

Camera Placement? 2 cameras in control area viewing Control Booth

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): 1 female deputy on duty each shift. No male deputies assigned to supervise the housing unit.

General Discussion with Inmates (Not Interviews): Inmate states she did not know PREA but knows how to report allegations of sexual abuse and feels sexually safe in the facility.

Phones: Yes, inside each POD

Grievance Process: Grievance lock box located in each POD with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: both compliant with doors. Deputies can view neck up and knees down for security purposes.

Recreation Areas/TV/Multi-Purpose: Open area in each POD for recreation & tv. Inmates have access to outdoor recreation area.

Living Unit: W-C Building – C1, C2, & C3 – Maximum, PC and Mental Health Inmates

PREA Information Posted: Yes, in 3 languages located in bulletin board panel case to include Notice of Auditor

Opposite Sex Viewing: None

Camera Placement? 1 camera in control area viewing Control Booth

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): NONE

General Discussion with Inmates (Not Interviews): NONE

Phones: Yes, inside each POD

Grievance Process: Grievance lock box located in each POD with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: Separate showers with doors. Bathrooms in cells.

Recreation Areas/TV/Multi-Purpose: Open area in each POD for recreation & tv. Inmates have access to outdoor recreation area and out of cell time.

Living Unit: W-1 Building – Dorms BA & BB Units – Medium Supervision Inmates

PREA Information Posted: Yes, in 3 languages located in bulletin board panel case

Opposite Sex Viewing: None

Camera Placement? None

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): None

General Discussion with Inmates (Not Interviews): Inmate states she could file a grievance if sexually abused or contact staff.

Phones: Yes, inside each Dorm

Grievance Process: Grievance lock box located in each Dorm with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: both compliant with doors and curtains. Deputies can view neck up and knees down for security purposes.

Recreation Areas/TV/Multi-Purpose: Inmates have access to outdoor recreation area.

Living Unit: W-1 Building – Rear Units (linear architecture) – Medium Supervision Inmates

PREA Information Posted: Yes, in 3 languages located on phones

Opposite Sex Viewing: None

Camera Placement? None

Announcement: Yes, upon entry to each Unit. How: Male Officer On Deck

General Discussion with Staff (Not Interviews): None

General Discussion with Inmates (Not Interviews): None

Phones: Yes, on wheels for each inmate to access while in cells

Grievance Process: Grievance lock box located on wall with access only to supervisors and above. Boxes checked each shift.

Showers and Bathrooms: Showers compliant with doors and curtains. Deputies can view neck up and knees down for security purposes. Bathrooms located in cells.

Recreation Areas/TV/Multi-Purpose: Inmates have access to outdoor recreation area.

Laundry

Hidden areas: None

Camera Placement: None

Supervision: Direct supervision – 1 deputy

Processing (Intake)

Strip Areas: 2 sides – male & female – male deputies assigned male side & female deputies for female side. Female deputy assigned each shift. Deputies wear body cameras and male deputies prohibited from going over to the female side except for exigent circumstances.

Interview Areas (Confidential): 1 room each side

Information Posted: PREA posters on both sides posted in 3 languages

Cameras: None

Phones: Located on each side

Ask for Information Provided to Offenders: Provided Sexual Awareness pamphlet & Inmate Handbook

#### Visitation

Strip/Shakedown Area: In housing areas for contact visiting.

Information Posted: Yes, to include hallways leading to contact visiting.

Camera Placement: In hallways leading to contact visiting.

#### Education (Academic)

Classrooms: Trailers 1, 2 & 3. All compliant except for TRAILER #1 which has blind-spot in back where the 2 bathrooms are located.

Camera Placement: None – 2 cameras per trailer planned for anticipated placement date in December 2017.

Supervision: 1 teacher and rover which comes by hourly.

#### Front Entrance (Reception Area)

PREA Information Provided: YES to include Sexual Awareness Pamphlets in 3 languages and 3rd Party Posters.

#### Facilities (Mechanical Services)

Tool Rooms: Located in W4 Kitchen

Camera Placement: No, planned for placement in December 2017

Supervision: Direct Supervision

#### Food Service - W4

Dining Rooms: Dining conducted in housing units

Officer Dining Area: Off Bull-Run hallway from housing units. Direct supervision from control. Always locked with PREA poster in officer dining room.

Kitchen: Hot boxes – truck crew from Main Kitchen provides food daily for inmate workers to load into hot boxes for delivery to housing units.

Coolers: None

Freezers: One

Dry Goods Storage: None

Garbage Area: In housing units

Dishroom: None

Tool Room: None

Camera Placement: None, planned implementation of 2 cameras in December 2017

Supervision: Direct supervision of 1 deputy

#### Restrictive Housing – W1 Special Housing

Hearing Rooms: Interview Room

Search Areas: None – searches conducted while inmate in cells.

Bathrooms: In cells

Showers: Off the hallway. Showers compliant with screens to negate cross-gender viewing.

Recreation: Recreation area with camera reviewed by control

Library: None

Property Room: None

Stairwells/Secondary Entrance: None

Camera Placement: Over control area and 1 at end of linear hallway

#### Health Services

Reception Area: Mirror and PREA Posters

Exam Rooms: Four

Treatment Rooms: One

Infirmery/Observation Rooms: None – if required, inmates are transferred to either Main Jail or Elmwood Men's medical for more appropriate treatment.

Suicide Watch Room(s): None

Grievance box: Lock box located in Medical waiting room.

#### Recreation Yard

Bathrooms: None

Camera Placement: Only in Special Housing Unit Yard

Hidden Areas: None

Following the physical plant review, Auditor conducted interviews comprised of a sampling of 22 random inmates selected from a housing roster of all inmates assigned to the facility and 5 inmates of varying disabled and risk characteristics such as Limited English Proficient, LGBTI inmates, Inmate who alleged sexual abuse at screening and inmate who reported sexual abuse while housed at the facility. A sampling of 20 random staff, 5 from each shift, was selected from staff shift roster provided by Agency for interviews.

On 7/26/17 Auditor completed the resident & staff interviews, then conducted interviews of 20 Specialized staff of various disciplines such as Agency Head designee, PREA Coordinator, PREA Manager, Facility Commander, Intermediate level staff (Team supervisors), Medical and Mental Health Manager, Personnel Administrator, SAFE & SANE Director, Victim Advocacy Services, Volunteers, Contractors, Investigative Staff, Classification Staff, Segregated Housing Staff, Incident Review Team, Retaliation Monitor Staff, 1st Responder Staff, Main Jail Intake Staff and Elmwood Women's Intake Processing Staff. . During resident inmate, staff mental health practitioners and YWCA Advocates were available for inmate emotional support if needed. No referrals for advocacy occurred during the inmate interview process. Following the interviews, the auditor conducted a review of 28 Personnel files, 20 screening records, 11 investigative files and 28 training records. Following the physical plant observation, an exit briefing was conducted on 7/27/17 and attended by Elmwood Women's Facility leadership and staff. General observations by auditor was discussed with attendees. On-Site Audit was then concluded at the end of the exit briefing. During the Post-Audit phase, PREA Coordinator and Auditor collaborated on issues discovered during the On-Site Audit review, interviews and document review. Agency conducted a number of corrections prior to auditor issuing the Interim Report on 8/25/17.

On 9/7/17, auditor submitted a Corrective Action Issue Paper to the facility for a focused response accompanied by supporting documentation to be completed and returned before 11/6/17. On 9/19/17, auditor conducted conference call with Santa Clara County Jail (SCCJ) Elmwood Women's Facility PREA Coordinator and PREA Compliance Manager regarding the Interim Report Corrective Action Plans. Agency agreed with the Plans as written. During the post audit, auditor and Agency maintained continuous contact to ensure the Corrective Action Plans were implemented. On 12/6/17, auditor conducted a 90-day onsite status review to review updates to the physical plant, poster placements, announcements, blind-spot corrections, interview of 9 randomly selected inmates selected from all inmates identified by housing unit, currently assigned to SCCJ Elmwood Women's Facility. Interview of 14 randomly selected staff from list of all staff assigned to the Elmwood Women's Facility to include 3 instructors working on the date of 90-day review . Auditor discovered a few discrepancies remained and

scheduled a second onsite review for 2/9/18.

On 2/6/18, auditor conducted a second 90-day onsite review to determine if Agency incorporated all Corrective Action Plans. During the review, auditor reviewed updates to the physical plant, placement of directives, blind spot corrections, additions to video monitoring, practice of intake procedures and inmate PREA education. Auditor interviewed 3 teachers assigned to work on date of onsite review regarding the Classroom #1 bathroom protocol. Auditor received list of inmates assigned by housing unit and were booked into Elmwood Women's facility over the past 90 days. 9 inmates were selected and interviewed with regards to screening procedures between Main Jail and Elmwood Processing to include inmate education. Review of 13 inmate screening files randomly selected from a list of 60 female inmates booked into the facility over the past 90 days. The Final Report was issued to the Agency Head and PREA Coordinator on 3/5/18.

## AUDIT FINDINGS

### Facility Characteristics:

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

### DESCRIPTION OF FACILITY CHARACTERISTICS

Elmwood Women's Correctional Facility, established in 1964 with a design capacity of 825 inmates. The Facility is located at located at 701 S. Abel Street, Milpitas. The facility provides care, housing, and retention of approximately 451 female inmates classified at all security levels. The facility is staffed by 81 correctional officers, 4 Sergeants, and 7 Custody Support Assistants and is a base of operations for a large number of volunteers and programs

The Elmwood Women's Facility is comprised of 3 buildings, W1, W2 & W4). There are 9 single cell housing units, 2 multiple occupancy cell housing units, 9 open bay/dorm housing units and 8 administration segregation cells. The Facility is designed for both direct and indirect supervision of inmates depending on the housing unit.

The Main Building includes the Medical Clinic, Visiting and Administrative Offices. Inmates housed in W2 building are under indirect supervision due to their classification. Inmates are escorted to classrooms for educational programs and religious services. Routine medical services are provided on a daily basis. Inmates with medical concerns requiring immediate medical care are escorted to the Elmwood Men's Facility medical building or the Main Jail Facility medical floor or to the County hospital for treatment. Inmates housed in W4 building are under direct supervision in the maximum housing pods and indirect supervision in the medium security pods. W1 unit contains 4 separate housing areas each constructed linear-style.

### Inmate Programs

The Santa Clara County Programs Division delivers services which cover a vast number of recipients including, the Department of Correction, community based organizations, the inmate population and the community at large. Based on classification, inmates are allowed to work in the W4 Kitchen, Supply and Laundry Services on grounds. Inmate programs are run during both day and evening shifts. Female inmate programs are as follows:

C.O.P.E.

IMPACT

Re-Entry Correction Program

A.W.A.K.E.

W.I.N.G.S.

Computer Training

Second Chance

Sustainability

Roadmap to Recovery

Business Management

P.A.C.T.

ServSafe Program

## AUDIT FINDINGS

### Summary of Audit Findings:

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

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

<b>Number of standards exceeded:</b>	1
<b>Number of standards met:</b>	44
<b>Number of standards not met:</b>	0

### SUMMARY OF AUDIT FINDINGS

On 7/25/17 through 7/27/17, a PREA Audit physical plant review was conducted at Elmwood Women's Detention Facility located in Santa Clara County, Milpitas California.

7 Standards were found non-compliant. The following includes the observed deficiencies, corrective action plan and relevant timelines to come into compliance:

115.13(a) During the on-site physical plant review, Auditor noticed that Classroom #1 has 2 bathrooms at the back of the long classroom. Observations indicate there is a supply closet between the bathrooms which obscures the view of the 1 instructor assigned to the classroom. Additionally, instructor is distracted while tending to students needs and maintaining number and whereabouts of students is hampered. Rover makes rounds to classroom once every hour. Monitoring cameras (2) for the classroom anticipated to be installed in December 2007. An interim method to cover this blind spot needs to be established.

#### CORRECTIVE ACTION:

1) Please provide Auditor with method to cover the Classroom #1 blind spot more effectively and indicate implementation date.

2) Provide auditor with verification of implementation via photo or directive.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

#### CORRECTIVE ACTION COMPLETION 2/6/18:

During 12/4/17 90-day on-site corrective action status review and physical plant review, auditor verified placement of directive in Classroom #1 and interviewed two teachers and 3 custody staff members who are security rovers. The first teacher was unaware of the Classroom #1 directive as she teaches in Classroom #3 and inmates are allowed to return to their dorms to use the bathroom since her classroom does not have one. When asked how she would allow inmate bathroom use in Classroom #1 if she was reassigned there, she indicated that she would need to review the any updates that pertain to Classroom #1. The second teacher is assigned to Classroom #1 and during her interview, she provided auditor with the protocol used for inmates needing to use both bathrooms in the classroom. She indicated that the inmates have always been polite and ask to use the bathrooms. The teachers station has been moved to

provide direct line of site to the bathrooms and the closet between the bathrooms has been moved to deleted blind spot from teacher's station. Interview of 3 deputies who are security rovers indicated they are aware of Classroom #1 - W2 officers station directive and recited the security protocol to me. One of the deputies started their position as a trainee for the first time this date and was able to provide specific welfare and blind spot check protocol to auditor. The remaining rover staff indicated the written protocol mandate and how they conduct their duties.

115.15(b) & 115.15(c) Auditor requires documentation to the Division Captain from deputy who conducted the pat-down search of female inmate per policy 14.15 page 17, III., 2. Case #24.

**CORRECTIVE ACTION:**

Agency to provide Auditor with documentation from deputy who conducted pat-down search of female inmate (identified in Case #24) to the Division Captain per policy 14.15, page 17, III., 2.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 12/22/17:**

Agency provided auditor with employee report relating to the cross-gender pat-search of inmate in Case #24. Documentation was initiated in a timely manner but did not possess a supervisor's signature. Inmate victim indicated there were female deputies in the court area where she was searched. Question remained if her cross-gender search was determined to be exigent circumstances? Incident Review Board recommendation: No cross-gender pat searches to be conducted by court deputies. Should exigent circumstances occur, the incident shall be documented immediately (Per policy 14.15). The assistant sheriff is also working on a department wide protocol for this issue.

On 12/22/17, the PREA Compliance Manager provided auditor with eight photos to indicate the distance between the jail and the court "workstations" (over 350 feet). The incident location of PREA case #24 was at Workstation #1. Workstation #1 is located near the Santa Clara County court house, not the Santa Clara County Jail. The inmates are escorted to the workstations via tunnel from Main Jail. As illustrated in the photographs, Workstation #1 is located over 350 feet from the start of the tunnel at Main Jail. The route to workstation #1 from Main Jail includes: a long hallway, short left turn, short right turn, another long hallway where you pass workstation #3, pass workstation #2, walk up a small incline to the end of the hall that has a sign for workstation #1, left turn to the hall where the workstation #1 holding cells are located.

The holding cell where the alleged prohibited pat search occurred in PREA case #24 was conducted in the hall where the holding cells are located for workstation #1. The court deputy workstations are not a part of the jail. Upon review of the evidence provided, the area where the alleged prohibited pat search occurred is outside the boundaries covered by the PREA Standard, sufficient to determine that the Court Deputy Workstations are not a part of the jails, therefore, eliminating the need for corrective action for this Standard provision.

115.33(b) Auditor conducted a review of the intake process at the Main Jail and discovered that inmates awaiting transportation to Elmwood Women's Facility are maintained in holding tank, unable to view the PREA video. Once at Elmwood Women's Intake Processing, they are not provided the PREA Video. PREA Video is played in a loop on housing unit televisions weekly, however, the inmates are not informed as to when the loop is activated.

**CORRECTIVE ACTION:**

1) Agency to provide method for female inmates transported to Elmwood Women's Facility to obtain their Comprehensive Education within 30 days. Auditor to return to the facility and re-interview for verification of compliance.

2) Agency to provide Auditor method of informing inmates when the PREA Video loop is playing in their housing units and date of implementation.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

#### CORRECTIVE ACTION COMPLETION 2/6/18:

Auditor received Directive dated 9/8/17 from the PREA Coordinator to all staff which mandates The Inmate Orientation Video as well as the PREA Video shall continuously play on channel #3 in the following areas: Men's and Women's Intake/Booking, Main Jail Classification, and Elmwood Processing. On 12/4/17, auditor conducted an on-site 90-day status review. Formal interviews with 7 inmates who have completed intake, booking and PREA initial education during the last 90-days indicated that comprehensive education has not been conducted or provided. During their time at the Processing Unit, waiting for housing, one inmate indicated the Processing Unit television was turned off, another indicated the inmates watched a cooking show, another indicated inmates watched the Madea television program. One inmate indicated she did not know what was on television as the volume was turned off so she ignored the program. The remaining 5 inmates indicated they did not see any PREA video at all either in Main Jail booking or in the Processing Unit while they waited for housing. Majority of the inmates were in processing for at least 20 minutes before transport to housing. Informal interviews of 2 inmates who had just arrived from processing were asked if they had seen the PREA video in Processing. They indicated that they had seen the video about 10 minutes ago before arriving at the housing unit. Interviews with 5 custody staff indicate PREA video is provided in the Processing Unit and provided in the housing units on channel #3. Both inmates and staff state that the inmates have control of the television remote and do not play the PREA video. Inmate interviews indicate the Processing Unit did not follow the 9/8/17 Directive from PREA Coordinator until the day of the 90-day on-site status review. The practice is not practiced or institutionalized.

During the 2/6/18 180-day status review, auditor interviewed 9 inmates who had been booked between November 2017 and January 2018. Inmates were randomly selected from list of 60 inmates assigned to all housing units within Elmwood Women's Facility with booking and release dates identified. All inmates indicated they were booked at Main Jail where they received the inmate rulebook and Sexual Awareness pamphlet. Review of 13 randomly selected screening files, which included the 9 inmates who were interviewed, were selected from the same list verified inmates receipt of inmate rule book, Sexual Awareness pamphlet, PREA video review and 30-day reassessment within required timeframes. Half read the pamphlet which provided information on inmate rights, zero tolerance, sexual abuse/harassment reporting methods and hotline access to the Rape Crisis Center. 5 of the inmates indicated they had viewed the PREA video in Processing, per the directive issued on 9/8/17. The remaining 4 inmates indicated they saw the video being run in the housing units as it is run weekly. Auditor observed the processing center and interviewed 3 intake staff. As auditor walked in, no inmates were awaiting placement, but the PREA video was playing in a loop. Staff indicates they continually play the video on the large monitors in both the male and female sides of Elmwood intake processing prior to inmates being housed. Bed rolls were reviewed and all had inmate handbooks and Sexual Awareness brochures included in the bed rolls. Agency provided auditor with refresher training rosters for PREA Video protocol in processing. All shifts (A thru D) were provided this training between 12/18/17 to 1/12/18. Training mandated that the PREA Information Loop (video) should be turned on and continuously playing on Channel 12 in the Processing area. Inmates should be in the Processing area long enough to view the complete PREA presentation, which lasts approximately 20 minutes. The PREA video is played in all housing units in a loop on Sundays.

115.34(c) Agency has identified 9 investigators for sex abuse cases. Agency has provided NIC training certificates for 8 investigators. Auditor awaiting receipt of the one remaining investigator.

**CORRECTIVE ACTION:**

Agency to provide NIC certification for the Investigator who conducted the investigation for Case #24. Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

115.51(d) Agency has not provided Auditor with method of providing or training staff of private reporting contact information.

**CORRECTIVE ACTION:**

1) Agency to provide Auditor methods staff are informed of how they can privately report sexual abuse/harassment of inmates.

2) Agency to provide Auditor with verification all staff have been trained on methods of private reporting of sexual abuse/harassment of inmates

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 12/6/17:**

During 12/6/17 90-day on-site status review, auditor interviewed 6 custody staff. All 6 interviewees indicate they have been trained either a few weeks ago in Jail Orientation, Correctional Officer Academy or both that staff can privately report allegations of sexual abuse to EEOC or San Jose PD. PREA Coordinator provided auditor with PREA I Sexual Assault & PREA II Sexual Harassment update web-based training which served as staff refresher/orientation training. These courses were conducted between 7/31/17 and 8/19/17. 337 custody staff signed the training rosters provided by the PREA Coordinator to include electronic verification from the training unit. During the training, staff are provided scenarios and graded on questioned responses during the training. Agency has satisfied Standard 115.51.

115.71(b) 7 investigators have provided certificates of completion of the NICIC or Peace Officer Standards of Training ICI-2 Investigation in Correctional Setting course. Auditor is awaiting training verification for the remaining 1.

**CORRECTIVE ACTION:**

Agency to provide Auditor with certificate to verify Investigator who investigated Case #24 has completed sexual abuse investigation in a confinement setting course.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 12/19/17:**

On 12/19/17, the PREA Coordinator provided auditor with the NIC certification for the outstanding special investigator and 3 investigations. These are the only PREA related investigations that have occurred after 8/25/17. Cases are as follows:

Case #64 - Classified as Staff sexual harassment case, investigated on the date allegation was made by certified sexual abuse investigator from the Jail Crimes Unit. Case was founded to be unfounded as inmate indicated staff was hiding under her bed, was only one assigned to the cell. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.

Case #65 - Classified as Consensual sex abuse, investigated on date allegation was made by certified

sexual abuse investigator from the Jail Crimes Unit. Case was found to be unfounded as inmate claimed to be sexually assaulted by a ghost. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.

Case #67 - Classified as Sexual Harassment by inmate, investigated on date of allegation by certified sexual abuse investigator from the Jail Crimes Unit. Case was found to be unsubstantiated and victim was rehoused. Incident Review was scheduled but inmate victim was released from custody 10 days prior to the Incident Review being held.

Auditor has determined based upon the PREA cases initiated after the interim report, that agency/facility protocols for handling PREA cases whether they be sexual abuse or sexual harassment allegations, are investigated by the Jail Crimes Unit special investigators certified to conduct sexual abuse investigations in a confinement setting. Auditor has determined that agency meets Standard 115.71.

115.81(a)/(c) Inmate who disclosed Sexual Victimization at Risk Screening was interviewed and indicated she was referred to Mental Health when she disclosed prior victimization during screening. Auditor reviewed this inmate's screening record and determined she was in fact referred to Mental Health after Classification and was seen by the Mental Health Practitioner within 2 days of the referral. Auditor had requested a referral roster of all inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner over the past 12 month prior to the on-site audit, however, Agency has not provided the roster as requested.

**CORRECTIVE ACTION:**

1. Agency to provide Auditor with referral roster of all inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner over the past 12 months.
2. Agency to provide Auditor with documentation to verify Mental Health conducted the followup meeting within 14 days or documentation to verify Inmate declined MH referral.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 12/19/17:**

On 12/19/17, PREA Coordinator provided auditor with Mental Health Referral Response records on 15 inmates who had been referred to mental health when disclosing prior victimization information during screening over the past 12 months. Mental Health record reviews indicate all inmates referred to mental health at booking received a mental health follow-up within 7 days of intake. Initial intake practitioner documented Inmates who declined referral in the referral records. Agency has satisfied this Standard provision.

The summary of Interim audit result findings are as followings:

Number of standards exceeded: 1

Number of standards met: 44

Number of standards not met: 0

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

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 complies with Standard Provision 115.11(a) &amp; provides mandated narrative and implementation outline as required per the Standard provision such as zero tolerance, definitions of prohibited behavior, implementation of Agency's approach towards sexual safety &amp; sanctions for prohibited behaviors regarding violation of Agency's sexual abuse policy. Review of Agency Organizational Chart verifies that the PREA Coordinator position is designated 3rd position from the Undersheriff which places the position in an upper-level, Agency-wide designation per Standard provision 115.11(b). Interview with the PREA Coordinator verifies she has enough time to manage of the Agency PREA related responsibilities and coordinates reach facility's efforts to comply with the PREA standards through the assistance of the PREA Compliance Managers assigned to each facility. The Custody Organizational Chart indicates a PREA Manager for Elmwood Women's Facility who reports directly to the PREA Coordinator. Interview with the PREA Compliance Manager indicates the position is provided enough time to manage all of the PREA related responsibilities &amp; coordinating the facility's efforts to comply with the PREA standards through communication with counterparts at the other facilities and work on any issues that may arise. Examine for PREA non-compliance in the facility and recommend corrective action.</p>

<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	N/A – Standard 115.12 does not apply to this Agency/Facility as Agency has no contracts for the confinement of inmates.

115.13	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Auditor's review of Elmwood Women's Facility Jail Staffing Plan August 2016 - July 2017 verifies compliance with this Standard provision. Agency reports that since the last audit in 2014, the average daily number of inmates is 436. 436 is the average daily number of inmates on which the Staffing Plan was predicated. Interview with Facility Commander, PREA Compliance Manager and Staffing Plan review indicate Staffing Plan is specific to Elmwood Women's Facility. Staffing levels and determination of the need for video monitoring is made through consideration of the criteria outlined in Standard provision 115.13(a). Classroom #1 has 2 bathrooms at the back of the long classroom. Observations indicate there is a supply closet between the bathrooms which obscures the view of the 1 instructor assigned to the classroom. Additionally, instructor is distracted while tending to students needs and maintaining number and whereabouts of students is hampered. Rover makes rounds to classroom once every hour. Monitoring cameras (2) for the classroom anticipated to be installed in December 2007. An interim method to cover this blind spot needs to be established.</p> <p>N/A - Standard 115.13 is not applicable as Agency reports there have been no deviations from the staffing plan over the past 12 months.</p> <p>Division Commanders and PREA Coordinator will annually review the Staffing Plan and submit to Division Chief for review and approval. In reviewing staffing levels, and the need for video monitoring to protect inmates against abuse, the Agency follows the 11 criteria outlined in Standard provision 115.13(a). Auditor's review of Elmwood Women's Facility Jail Staffing Plan August 2016 - July 2017 verifies compliance with Standard provision 115.13(c). On 3/10/17, Elmwood Complex Administration issued a directive which mandates the enhanced blind spot checks to be conducted every 60 minutes based upon Incident Review corrective action plans and Staffing Plan Review. Interview with PREA Coordinator indicates she is consulted regarding any assessments of or adjustments to the Staffing Plan on an annual basis in conjunction with the Annual Staff Transfer per PREA Policy 14.15. Review of Annual Staffing Plan dated 8/1/16 for Elmwood Women's Complex indicated a number of sexual abuse/harassments incidents over the past 12 months and assessed the staffing and video capabilities of the Complex. Realizing the Complex requires increased video monitoring to address inmate safety and prevention of sexual abuse, a request for video monitoring upgrade projects for all facilities was submitted to the County for consideration and approval. The request was approved and is moving forward. Staff conducts thorough physical searches of identified blind-spots in isolated areas in addition to welfare checks within the housing units and documents these actions. Approximately 850 fixed video surveillance cameras are scheduled to be installed at the Elmwood Complex with an anticipated completion date of December 2017. Agency is also averaging 4 new Correctional Deputy Academy classes annually which anticipates increase staffing levels to ensure the overall securing of all facilities. During the Audit On-Site physical plant review, auditor noticed a blind spot in Classroom #1 where 2 bathrooms are located in the rear of the classroom with a storage closet between the two doors. The teacher was distracted and, therefore, has direct supervision as to who or how many students enter the bathroom. Roving security of 1 deputy arrives every 60 minutes. This blind spot was identified during the camera upgrade review which involved both the PREA Coordinator and PREA Manager. 2 cameras are scheduled to be installed in Classroom #1</p>

during the video technology upgrade scheduled for December 2017,

Auditor has determined that Standard provision 115.13 is non-compliant

**CORRECTIVE ACTION:**

- 1) Please provide Auditor with method to cover the Classroom #1 blind spot more effectively and indicate implementation date.
- 2) Provide auditor with verification of implementation via photo or directive.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18.

**CORRECTIVE ACTION COMPLETION 2/6/18:**

During 12/4/17 90-day on-site corrective action status review and physical plant review, auditor verified placement of directive in Classroom #1 and interviewed two teachers and 3 custody staff members who are security rovers. The first teacher was unaware of the Classroom #1 directive as she teaches in Classroom #3 and inmates are allowed to return to their dorms to use the bathroom since her classroom does not have one. When asked how she would allow inmate bathroom use in Classroom #1 if she was reassigned there, she indicated that she would need to review the any updates that pertain to Classroom #1. The second teacher is assigned to Classroom #1 and during her interview, she provided auditor with the protocol used for inmates needing to use both bathrooms in the classroom. She indicated that the inmates have always been polite and ask to use the bathrooms. The teachers station has been moved to provide direct line of site to the bathrooms and the closet between the bathrooms has been moved to deleted blind spot from teacher's station. Interview of 3 deputies who are security rovers indicated they are aware of Classroom #1 - W2 officers station directive and recited the security protocol to me. One of the deputies started their position as a trainee for the first time this date and was able to provide specific welfare and blind spot check protocol to auditor. The remaining rover staff indicated the written protocol mandate and how they conduct their duties.

115.14	Youthful inmates
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	N/A - Standard 115.14 is not applicable to Santa Clara County Jails as they do not house youthful inmates per policy. Policy 13.13 page #3 II identifies procedure for housing for inmates who were booked & housed as adults & later claim or are suspected to be juveniles. Procedure indicates inmate is to be immediately separated from the inmate population and mandates "sight and sound separation between juvenile and adult inmates" before being transported to juvenile hall.

115.15	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates staff who supervise inmates will receive cross-gender supervision training &amp; training shall be tailored to the gender of inmates at the employee's facility. No cross gender body cavity or strip searches have been conducted over the past 12 months. Policy includes narrative, which specifically prohibits cross-gender strip or cross-gender visual body cavity searches of inmates. Curriculum for Cross-Gender Supervision training for custody staff has been provided by Agency and is compliant with Standard 115.15. Interview with custody staff, all indicate they have been trained on cross-gender pat down searches, but cross gender strip or visual searches are prohibited. Only medical staff conduct these types of searches on inmates.</p> <p>Policy 14.15 &amp; Policy 09.05 prohibits cross gender pat-down searches of female inmates absent exigent circumstances. Such searches will be documented if conducted. Over the past 12 months, one cross gender pat down search was conducted when male staff pat searched a female inmate. No exigent circumstances involved. Investigation was substantiated. Incident Review Board findings on this case are pending. The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision. Curriculum for Cross-Gender Supervision training for custody staff has been provided by Agency and is compliant with Standard 115.15. Interview with random sample of 20 staff and random sample of 22 inmates indicate male staff do not conduct cross-gender pat-down searches of female inmates.</p> <p>Policy 14.15 &amp; Policy 09.05 prohibits cross gender pat-down searches of female inmates absent exigent circumstances. Such searches will be documented if conducted. Any and all cross-gender strip searches and cross-gender visual body cavity searches be documented. Over the past 12 months, one cross gender pat down search was conducted when male staff pat searched a female inmate. No exigent circumstances involved. There are no reports of female staff conducting pat-down searches on male inmates. During interview with custody staff, indicate they have been trained on cross-gender pat down searches, but cross gender strip or visual searches are prohibited. Only medical staff conduct these types of searches on inmates. There is no instances of custody or medical staff conducting any cross-gender strip searches or visual body cavity searches of inmates.</p> <p>Policy 14.15 requires staff of opposite gender to announce their presence when entering a housing unit and inmates are provided areas of privacy where they are in a situation of undress barring exigent circumstances. Policy also includes narrative which mandates facility provide shower screens for Transgender and Intersex inmates for privacy purposes. Curriculum for Cross-Gender Supervision training for custody staff and Elmwood Administrative Directive #2016-014 PREA Cross Gender Announcement has been provided by Agency and is compliant with Standard 115.15. Interview with Random Sample of 25 inmates and Random Sample of 20 Staff indicates inmates are provided the ability to perform bodily functions and shower without non-medical staff of the opposite gender viewing body parts. Observation of Elmwood Women's Facility physical plant verifies no cross-gender viewing incident to routine count or security checks. Housing units all have separate showers and possess either doors or curtain barriers for privacy. Housing POD bathrooms have doors and linear cells have toilets which rely on staff announcements before entering the housing linear hallway. Review of video surveillance cameras in control areas verify no cross-gender viewing</p>

of bathrooms or showers are available. During On-Site Physical Plant Review, Auditor observed staff announcing presence of males entering the housing units to include ancillary staff such as medical practitioners or mental health practitioners.

Policy 14.15 prohibits pat searches or physically examining transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Over the past 12 months no search of transgender or intersex inmate for the sole purpose of determining the inmate's genital status has been conducted.

Interview with Random Sample of 20 staff verifies their training on the prohibition of searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Interview with a transgender inmate verifies staff claim. Interview with the 1 Transgender inmate verifies the same.

Auditor has determined that Standard provisions 115.15(b) and 115.15(c) is non-compliant.

#### CORRECTIVE ACTION:

Agency to provide Auditor with documentation from deputy who conducted pat-down search of female inmate (identified in Case #24) to the Division Captain per policy 14.15, page 17, III., 2.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

#### CORRECTIVE ACTION COMPLETION 12/22/17:

Agency provided auditor with employee report relating to the cross-gender pat-search of inmate in Case #24. Documentation was initiated in a timely manner but did not possess a supervisor's signature. Inmate victim indicated there were female deputies in the court area where she was searched. Question remained if her cross-gender search was determined to be exigent circumstances? Incident Review Board recommendation: No cross-gender pat searches to be conducted by court deputies. Should exigent circumstances occur, the incident shall be documented immediately (Per policy 14.15). The assistant sheriff is also working on a department wide protocol for this issue.

On 12/22/17, the PREA Compliance Manager provided auditor with eight photos to indicate the distance between the jail and the court "workstations" (over 350 feet). The incident location of PREA case #24 was at Workstation #1. Workstation #1 is located near the Santa Clara County court house, not the Santa Clara County Jail. The inmates are escorted to the workstations via tunnel from Main Jail. As illustrated in the photographs, Workstation #1 is located over 350 feet from the start of the tunnel at Main Jail. The route to workstation #1 from Main Jail includes: a long hallway, short left turn, short right turn, another long hallway where you pass workstation #3, pass workstation #2, walk up a small incline to the end of the hall that has a sign for workstation #1, left turn to the hall where the workstation #1 holding cells are located.

The holding cell where the alleged prohibited pat search occurred in PREA case #24 was conducted in the hall where the holding cells are located for workstation #1. The court deputy workstations are not a part of the jail. Upon review of the evidence provided, the area where the alleged prohibited pat search occurred is outside the boundaries covered by the PREA Standard, sufficient to determine that the Court Deputy Workstations are not a part of the jails, therefore, eliminating the need for corrective action for this Standard provision.



<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15, 13.11, 13.17, PREA Pamphlet in both English &amp; Spanish, PREA Posters in both English, Vietnamese &amp; Spanish were reviewed by Auditor. Contract for deaf or hard of hearing interpreter services provided with PAQ. Supporting documentation such as pamphlet inserts and policy narrative regarding verbal communication to verify disabled inmates are provided effective communication as it relates to PREA education. Policy requires posted signs in all housing units to provide effective communication and understanding for disabled and non-English speaking inmates. Policy mandates staff document on PREA Reporting Information Worksheet all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency, TDD &amp; TTY access for deaf &amp; blind inmates. Agency has provided auditor with Language Line/Voiance and Partners in Communications Interpreter contracts, which complies with Standard 115.16. Interview with Agency Head and Disabled Inmates indicate Agency works with disabled inmates to assist them with effective communication and understanding of the PREA education. There are numerous methods inmates are provided different modes of communication.</p> <p>Policy 14.15 compliant with Standard provision 115.16(b). Interpreter contract with Partners in Communication LLC for deaf &amp; hard of hearing inmates provided. Inmate rule book provided in English, Spanish &amp; Vietnamese to verify effective communication for disabled or limited English proficient inmates to include TTY access. Policy requires posted signs in housing units in all languages to provide effective communication. Policy mandates staff document on PREA Reporting Information Worksheet all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency. Voiance MOU provides for effective communication for inmates who are limited English proficient. Interview with Disabled Inmates indicate interpreters are available at any time they need to communicate to staff or visa versa. Auditor observed staff certified in Spanish to interpret during an inmate interview. The inmate approved of this method of communication prior to starting the interview. Auditor also noticed TTY &amp; TDD machines available to inmates during the physical plant review.</p>

115.17	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 complies with Standard provision 115.17 and uses exact same criteria as outlined in the Standard provision. Review of 28 staff and contractors who were hired over the past 12 months verify that proper criminal record background checks were conducted and questions regarding past sexual misconduct were asked and answered. These background checks also verified completion of FBI/DOJ background clearance checks. Review of employment and contractor applications verified questions regarding past sexual misconduct were asked and answered.</p> <p>Policy 14.15 mandates consideration of any incidents of sexual harassment in determining whether to hire or promote anyone or enlist services of any contractor who may have contact with inmates. Interview with Human Resources Director verifies the facility considers prior incidents of sexual harassment when determining hiring or promotion or enlisting services of contractors who may have contact with inmates.</p> <p>Policy 14.15 and Policy 09.05 mandates use of Standard provision criteria before hiring any new employees who may have contact with inmates. Agency indicates over the past 12 months 61 staff were hired who may have contact with inmates who have had criminal background record checks. This is 100% of the total number of new employees hired during that period. Interview with Human Resources Director indicates the Agency performs background checks for all newly hired employees who may have contact with inmates. Those in consideration for promotion must complete a pre-interview application which asks questions regarding and prior sexual abuse misconduct. All law enforcement and contractors have an affirmative duty to report any policy contact and arrest. The Department of Justice also provides notice if any employee or contractor is arrested. Review of 20 randomly selected employee background checks of employees hired in the past 12 months verified all completed the FBI/DOJ, background clearance checks.</p> <p>Policies 14.15 &amp; 09.07 mandates the use of Standard provision criteria before it hires any new employees who may have contact with inmates. PAQ indicates 2038 contracts for services throughout the Agency were granted in past 12 months and 100% of said staff covered in these contracts who may have contact with inmates, had criminal background record checks conducted. Interview with Human Resources Director indicates contractors &amp; volunteers go through the same background check as employees to obtain a 2-year gate clearance. Background clearance checks for 4 contractors &amp; 4 volunteers were provided to auditor for verification of compliance.</p> <p>Policy 14.15 mandates conducting employee criminal background records checks at least every 5 years per Standard provision 115.17(e). Policy also mandates employees &amp; contractors shall report within 24 hours when arrested or charged with any violation of the law associated with sexual abuse, sexual misconduct or sexual harassment. The Personnel Unit receives notification from the Department of Justice on any criminal arrest or conviction of an employee hired by the department. Interview with Human Resources Director indicates Federal &amp; State criminal history checks, Law Enforcement version of the Public Records Check, contact with references &amp; secondary references are used to conduct the background checks. Background checks for contractors are reoccurring every 5 years &amp; badge staff are subject to an arrest notification system through DOJ, State and DMV record. Upon a hit, an auto-generated letter is provided to the Department. Internal Affairs conducts a check with</p>

these systems when employee is placed in a new assignment.

Policy 14.15 mandates Agency ask all job applicants who may have contact with inmates about previous sexual abuse/sexual harassment in written applications and/or interviews for hiring & promotions or written self evaluation conducted as part of reviews of current employees. The agency also imposes upon employees a continuing affirmative duty to disclose any such misconduct. Interview with Human Resources Director indicates a self disclosure mandate is provided on the background form all job applicants and employees prior to promotion. Review of personnel records verify the self-disclosure forms. Agency provided auditor with copies of employee application forms (Personal History Statement, Pre-Background Questionnaire and Pre-background Interview Questionnaire) for verification of compliance.

Policy 14.15 mandates material omissions regarding misconduct identified in this Standard provision or provision of materially false information, shall be grounds for termination per Standard provision 115.17(g).

<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	N/A - Standard 115.18 does not apply to Agency/facility as they have not acquired any new facility, planned any substantial expansion or modification of existing facilities since last PREA audit which occurred in 2014.

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency is responsible for conducting administrative and criminal sexual abuse investigations. PREA Policy 14.15 mandates use of uniform evidence protocol for sex abuse allegation investigations and outlines said protocol for Santa Clara County. Evidence Protocol for Elmwood Complex is provided by Agency and reviewed by Auditor to be found compliant with this Standard provision. Interview with random sample of 20 staff indicates extensive knowledge of protocol used when obtaining usable physical evidence for administrative proceedings &amp; criminal prosecutions.</p> <p>PREA Policy 14.15 mandates staff investigating allegations of sexual abuse shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. Said protocol shall be developmentally appropriate for youth, where applicable. Policy includes detailed responsibilities for 1st responders, medical, mental health, advocacy, facility leadership and investigators in a Coordinated Response plan.</p> <p>Policy 14.15 mandates victims of sexual abuse have access to forensic medical examinations without financial cost. Safe/Sane nurses are available through outside hospital facility (Valley Medical Center) contracted with the County. Policy also includes mandate that if SAFE/SANE nurse not available to conduct forensic examination, facility will document efforts to obtain SAFE/SANE nurse. No forensic medical exams have been conducted over the past 12 months. Interview with SAFE/SANE Nurse at Valley Medical Center indicates the Center has an MOU (provided by Agency) with Santa Clara County Valley Medical Center to provide forensic examinations for victims of sexual abuse housed at Santa Clara County correctional facilities. The SAFE/SANE/SART nurses are on call 24/7. Forensic exams are conducted in the Emergency Room. Advocates are allowed to be present during the exams. If no advocate traveling with the victim, SART calls YWCA advocate services to have advocate present. Agency indicated that no inmates have had forensic examinations provided over the past 12 months.</p> <p>Policy 14.15 page #41 mandates facility provide sex abuse victim an advocate from Rape Crisis Center (YWCA) or qualified staff member from Adult Custody Mental Health Services to provide emotional support, crisis intervention, information and referrals as necessary. Agency provided YWCA Rape Crisis Center MOU active from 7/1/15 to 6/30/18 which provides for emotional support, victim advocacy and reporting. Interview with PREA Compliance Manager indicates inmates are provided contact with YWCA rape crisis center which provides a reporting entity outside Agency and also provides advocacy for emotional support. Interview with random sample of 25 inmates indicate most are aware of outside agency support if they need it and are aware of the posters by the phones in housing units which provide toll free numbers to access these services.</p> <p>Policy 14.15 mandates if requested by victim the advocate or Alameda County Health Services (ACHS) Mental Health Staff member shall provide support to victim throughout the medical examination process. Interview with PREA Compliance Manager indicates inmates are provided contact with YWCA, an outside rape crisis center which provides a reporting entity outside Agency and also provides advocacy for emotional support. Interview with random sample of inmates indicate most are aware of outside agency support if they need it and are aware of the posters by the phones in housing units which provide toll free numbers to access</p>

these services.

N/A - Standard provision 115.21(f) does not apply to this facility as it is responsible for both administrative and criminal investigations.

Auditor is not required to audit Standard provision 115.21(g).

Advocates from YWCA Rape Crisis Center and ACHS Mental Health have received education concerning sexual assault and forensic examination issues in general.

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>PREA Policy 14.15 mandates Agency ensures administrative or criminal investigations are completed for all allegations of sex abuse &amp; sex harassment. Agency reports that in past 12 months, a total of 11 sex abuse &amp; sex harassment allegations were received. Out of the 11 total number of allegations of sexual abuse/harassment received, 9 resulted in administrative investigations and 2 were referred for criminal investigation. 4 cases were investigated as sexual harassment allegations and 7 cases were investigated as sexual abuse allegations. All investigations have been completed. Review of all 11 cases provided by Agency verify compliance with this Standard provision 115.22(a). Interview with Undersheriff verifies that all administrative &amp; criminal allegations of sexual abuse are fully investigated. Review of Elmwood Women’s facility investigations determined of the 11 cases, 2 cases were referred for criminal investigation. One case was unsubstantiated and the other was substantiated. The remaining 9 cases were administrative investigations.</p> <p>Policy 14.15 mandates sex abuse/sex harassment allegations be referred for investigation with agency with legal authority to conduct criminal investigations. Santa Clara County Sheriff’s office conducts its own criminal investigations. Policy 09.29 mandates that the Sheriff’s Department of Corrections is responsible for reporting and investigating crimes. Agency’s investigation policy as it relates to sexual abuse/harassment allegations is posted on the Agency website. The agency documents all referrals of sexual abuse/harassment for administrative and criminal investigations. Auditor reviewed all 11 sexual misconduct investigations that occurred over the past 12 months and all were documented. Policy 14.15 mandates sex abuse/sex harassment allegations be referred for investigation with agency with legal authority to conduct criminal investigations. Santa Clara County Sheriff’s office.</p> <p>N/A - Agency is responsible for conducting both administrative and criminal investigations. Auditor is not required to audit Standard provisions 115.22(d) and 115.22(e).</p>

<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates all staff including contractors &amp; volunteers responsible for supervision inmates or who may come in contact with inmates will receive PREA training. The 10 criteria identified in Standard provision 115.31(a) is included in the policy. PREA training curriculum, Orientation and Employee handouts were provided to auditor and covers all criteria outlined in Standard provision 115.31(a). Documentation covers Zero Tolerance, Inmate rights, Reporting, Effective Communication and Sexual Harassment. Training Powerpoint is the complete PREA Training platform for Employee Education. PREA training shall be tailored to the gender of the inmates at the employee's facility. If employee is reassigned from a facility that houses only male inmates to one that houses only female inmates or visa versa, that employee shall receive additional training. Agency provided Auditor with New PREA Employee Handout which outlines Zero Tolerance policy &amp; provides acknowledgement page to be signed by new employee and submitted to PREA Coordinator for tracking, training rosters for sexual abuse, sexual harassment and cross gender training for 48 Agency employees who were hired over the past 12 months. Interviews with random sample of 20 staff verify their education and training in each of the training criteria identified in Standard provision 115.31(a). Prior to the on-site review, auditor was provided electronic PREA training records, to include sign-in sheets and acknowledgement forms for all custody staff. Training acknowledgement forms were provided for all volunteers, contractors, medical &amp; mental health staff.</p> <p>Policy 14.15 mandates PREA training shall be tailored to the gender of the inmates at the employee's facility. If employee is reassigned from a facility that houses only male inmates to one that houses only female inmates or visa versa, that employee shall receive additional training. Review of sample of 44 electronic training records of staff and training curriculum verifies compliance with Standard 115.31(b). Policy 14.15 mandates PREA training shall be tailored to the gender of the inmates at the employee's facility. If employee is reassigned from a facility that houses only male inmates to one that houses only female inmates or visa versa, that employee shall receive additional training. Interview with random sample of 20 staff indicate they have taken cross-gender pat-down search training and gender responsive training annually. Review of electronic training records verify their statements.</p> <p>Refresher PREA training is provided bi-annually as verified with review of training rosters for 44 staff and interview of 28 random staff sampling.</p>

115.32	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 page #18 mandates all volunteers &amp; contractors who have contact with inmates be trained in PREA. Agency provided Auditor with copy of the New PREA Contractors &amp; Volunteers handout which provides for Zero-Tolerance Policy, definitions of sexual misconduct, reporting methods for sexual misconduct, confidentiality and acknowledgement page to be completed by contractors &amp; volunteers after training to be submitted to PREA Coordinator. Agency reports 2038 volunteers and contractors have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. Review of training records of a random sample of 4 contractors &amp; 4 volunteers who routinely work at Elmwood Women's Facility verifies compliance with the Standard. Agency provided Auditor with copies of volunteer &amp; contractor training records and acknowledgment of understanding. Interview with volunteer and contractor indicate they both have received PREA training along with custody staff to include 1st Responder responsibilities as non-custody staff and Zero Tolerance. The signed statement of acknowledgement to verify they understand the PREA training received. Interviews with sample of 4 contractors and 4 volunteers verify their understanding of their 1st responder duties and Zero Tolerance Policy.</p> <p>Policy 14.15 page #18 mandates all contractors and volunteers responsible for supervision inmates or whom may come in contact with inmates in custody facilities and in all out-of-custody programs will receive the same PREA training as staff. New PREA Contractors &amp; Volunteers handout which provides for Zero-Tolerance Policy, definitions of sexual misconduct, reporting methods for sexual misconduct, confidentiality and acknowledgement page to be completed by contractors &amp; volunteers after training to be submitted to PREA Coordinator. Interview with volunteer and contractor indicate they both have received PREA training along with custody staff to include 1st Responder responsibilities as non-custody staff and Zero Tolerance. Review of training records for 4 Volunteers and 4 Contractors verifies compliance.</p> <p>Policy 14.15 mandates the facility PREA Manager maintain the PREA training documentation of contractors and volunteers. Agency maintains training acknowledgement documentation both electronically and signed documentation. Auditor reviewed training records of 4 contractors and 4 volunteers to verify compliance with Standard provision 115.32(c).</p>

115.33	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Inmates are provided la PREA pamphlet at intake which outlines the Department's Zero Tolerance policies on both sexual harassment and acts of sexual violence. Reporting options are outlined. At the intake desk, a laminated poster affixed to the Booking and Classification desk outlines Inmate Rights under PREA. All inmates are required to read the Comprehensive Education poster to determine understanding of their rights and English proficiency or other disability that may hinder effective communication. Agency reports that over the past 12 months 17,009 inmates (100%), were provided this information at intake. Inmate Sexual Assault Awareness pamphlets, provided at intake, are printed in English, Spanish and Vietnamese for effective communication in compliance with Standard 115.33. Interview with intake staff at both Main Jail and Elmwood Complex Intake Processing Unit verifies provision of Inmate Handbook and Sexual Awareness Pamphlet at Intake. Interview with random sample of 25 inmates determine the majority remember receiving the documentation at Intake, but did not read it. During on-site review, Auditor observed both the handbook and pamphlet on both the female and male booking desks written in English, Spanish and Vietnamese. Intake booking and initial classification is conducted at Main Jail Booking processes inmates and provides documentation at the end of their Intake session before moving to Classification. The Elmwood Complex Processing Intake Unit area ensures inmates have Zero Tolerance information, inmate handbook and Sexual awareness pamphlet when transferred from Main Jail to the Elmwood Women's facility.</p> <p>Agency reports that over the past 12 months 17,009 inmates (100%), received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake. Intake staff indicate provision of comprehensive education during intake/booking and ongoing education while housed in the facilities. Auditor observation at the Elmwood Intake Desk processes verified Intake Staff statements. Interview with random sample of 25 inmates indicate the majority inmate interviewed verified they were provided handbook and pamphlet at intake but did not receive comprehensive education by viewing the PREA video. 17 of the inmates interviewed indicated they did not receive any type of comprehensive education. Auditor reviewed the screening files of the 17 inmates in question. The inmates signed for the inmate handbook and verified receiving comprehensive PREA education through signed acknowledgement documentation. Auditor reviewed 25 randomly selected intake screening records. Auditor verified all 25 inmates received comprehensive education through signed acknowledgement documentation. Auditor conducted a review of the intake process at the Main Jail and discovered that inmates awaiting transportation to Elmwood Women's Facility are maintained in holding tank, unable to view the PREA video. Once at Elmwood Women's Intake Processing, they are not provided the PREA Video. PREA Video is played in a loop on housing unit televisions weekly, however, the inmates are not informed as to when the loop is activated.</p> <p>Agency reports all inmates are provided initial and comprehensive education at intake. Comprehensive education is provided during booking on a continuous loop video with closed caption. Directive memorandum dated 4/15/16 mandates staff to offer and provide the Sexual Assault Awareness education pamphlet in one of 3 languages of their choice to any female inmate transferred between Elmwood Women's Facility and the Main Jail. Directive</p>

Memorandum dated 5/29/17 Inmate Transfer Receipt PREA Acknowledgement REMINDER P2017-01 is a training reminder of the 4/15/16 female inmate transfer memorandum and is used during refresher training. Interview with Main Jail Intake staff and Elmwood Intake Processing staff indicate inmates are provided Comprehensive education via video. Auditor conducted a review of the intake process at the Main Jail and discovered that inmates awaiting transportation to Elmwood Women's Facility are maintained in holding tank, unable to view the PREA video. Once at Elmwood Women's Intake Processing, they are not provided the PREA Video. PREA Video is played in a loop on housing unit televisions weekly, however, the inmates are not informed as to when the loop is activated.

Policy 14.15 mandates All inmates will have meaningful access to all aspects of the Department's effort to prevent, detect, and respond to sexual abuse, sexual assault, sexual misconduct and sexual harassment including inmates with disabilities and limited English proficiency. All PREA communications, both written and verbal, will provide effective communication and understanding for disabled and non-English speaking inmates. Staff will document on the PREA Reporting Information Worksheet, all steps taken to provide effective communication and understanding to inmates with disabilities or limited English proficiency. Inmate interpreter contractors are also made available. PREA inmate education pamphlets are provided in English, Spanish and Vietnamese and PREA video is provided with closed caption for otherwise disabled inmates. Agency provides directive specific to classification staff which mandates protocol which identifies inmates who are limited in their reading skills or otherwise disabled. The protocol is as follows, "during every classification interview with an inmate, classification staff will have each and every inmate read a couple of basic sentences aloud that are PREA related. Classification staff will ask the inmate if they understood what they just read and the inmate can either confirm or deny that they understood. That confirmation or denial will be documented on the supplemental worksheet. If the inmate says that they do not understand, the classification deputy will attempt to explain the information contained in the sentences the inmate just read as simply and clearly as possible. If the inmate still does not understand, classification staff will fill out a med/psych referral for the inmate as possibly being developmentally disabled (DD) and potentially needing further assessment. That referral would be forwarded to the intake nurse for processing from there. This referral would also be documented on the supplemental PREA worksheet as box to be checked. A copy of the referral would then be attached to the entire PREA packet that gets submitted up the chain." Review of inmate education materials indicate the inmate handbook and sexual assault pamphlet are provided in English, Spanish and Vietnamese. Interpreters are provided should an inmate require them. 20 minute Comprehensive Education Video provided to auditor for review.

Policy 14.15 mandates during every classification interview with an inmate, classification staff will have each and every inmate read a couple of basic sentences aloud that are PREA related. Classification staff will ask the inmate if they understood what they just read and the inmate can either confirm or deny that they understood. That confirmation or denial will be documented on the supplemental worksheet. Inmate education is also provided via video in Classification and in the housing units which have closed caption in Spanish. Review of a random sample of 25 inmate screening records document all inmates have received both initial and comprehensive PREA education within 72 hours. Auditor reviewed 25 randomly selected intake screening records. Auditor verified all 21 inmates received comprehensive education through signed acknowledgement documentation.

Auditor has determined that Standard provisions 115.33(b) and 115.33(c) are non-compliant

**CORRECTIVE ACTION:**

- 1) Agency to provide method for female inmates transported to Elmwood Women's Facility to obtain their Comprehensive Education within 30 days. Auditor to return to the facility and re-interview for verification of compliance.
- 2) Agency to provide Auditor method of informing inmates when the PREA Video loop is playing in their housing units and date of implementation.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 2/6/18:**

Auditor received Directive dated 9/8/17 from the PREA Coordinator to all staff which mandates The Inmate Orientation Video as well as the PREA Video shall continuously play on channel #3 in the following areas: Men's and Women's Intake/Booking, Main Jail Classification, and Elmwood Processing. On 12/4/17, auditor conducted an on-site 90-day status review. Formal interviews with 7 inmates who have completed intake, booking and PREA initial education during the last 90-days indicated that comprehensive education has not been conducted or provided. During their time at the Processing Unit, waiting for housing, one inmate indicated the Processing Unit television was turned off, another indicated the inmates watched a cooking show, another indicated inmates watched the Madea television program. One inmate indicated she did not know what was on television as the volume was turned off so she ignored the program. The remaining 5 inmates indicated they did not see any PREA video at all either in Main Jail booking or in the Processing Unit while they waited for housing. Majority of the inmates were in processing for at least 20 minutes before transport to housing. Informal interviews of 2 inmates who had just arrived from processing were asked if they had seen the PREA video in Processing. They indicated that they had seen the video about 10 minutes ago before arriving at the housing unit. Interviews with 5 custody staff indicate PREA video is provided in the Processing Unit and provided in the housing units on channel #3. Both inmates and staff state that the inmates have control of the television remote and do not play the PREA video. Inmate interviews indicate the Processing Unit did not follow the 9/8/17 Directive from PREA Coordinator until the day of the 90-day on-site status review. The practice is not practiced or institutionalized.

During the 2/6/18 180-day status review, auditor interviewed 9 inmates who had been booked between November 2017 and January 2018. Inmates were randomly selected from list of 60 inmates assigned to all housing units within Elmwood Women's Facility with booking and release dates identified. All inmates indicated they were booked at Main Jail where they received the inmate rulebook and Sexual Awareness pamphlet. Review of 13 randomly selected screening files, which included the 9 inmates who were interviewed, were selected from the same list verified inmates receipt of inmate rule book, Sexual Awareness pamphlet, PREA video review and 30-day reassessment within required timeframes. Half read the pamphlet which provided information on inmate rights, zero tolerance, sexual abuse/harassment reporting methods and hotline access to the Rape Crisis Center. 5 of the inmates indicated they had viewed the PREA video in Processing, per the directive issued on 9/8/17. The remaining 4 inmates indicated they saw the video being run in the housing units as it is run weekly. Auditor observed the processing center and interviewed 3 intake staff. As auditor walked in, no inmates were awaiting placement, but the PREA video was playing in a

loop. Staff indicates they continually play the video on the large monitors in both the male and female sides of Elmwood intake processing prior to inmates being housed. Bed rolls were reviewed and all had inmate handbooks and Sexual Awareness brochures included in the bed rolls. Agency provided auditor with refresher training rosters for PREA Video protocol in processing. All shifts (A thru D) were provided this training between 12/18/17 to 1/12/18. Training mandated that the PREA Information Loop (video) should be turned on and continuously playing on Channel 12 in the Processing area. Inmates should be in the Processing area long enough to view the complete PREA presentation, which lasts approximately 20 minutes. The PREA video is played in all housing units in a loop on Sundays.

115.34	<b>Specialized training: Investigations</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1484 571">Policy 14.15 mandates Where sexual abuse is alleged, the investigation shall be conducted by JCI Unit investigators that have received special training in sexual abuse investigations in confinement settings. Training for all investigators is through NIC. Agency has identified 9 investigators for sex abuse cases. Interview with Investigative staff indicate they receive training in conducting Sexual Abuse Investigations in a confinement setting through either NIC or POST.</p> <p data-bbox="252 582 1468 873">Training for all investigators is through NIC which has been deemed PREA Compliant as they provide training in techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Interview with Investigative staff indicate their training include Miranda, Garrity and Lybarger warnings. Interview with Investigative staff indicate their training include Miranda, Garrity and Lybarger warnings.</p> <p data-bbox="252 884 1484 996">Training for all investigators is through NIC or ICI. Agency has identified 9 investigators for sex abuse cases. Agency has provided NIC training certificates for 8 investigators. Auditor awaiting receipt of the one remaining investigator.</p> <p data-bbox="252 1052 1228 1086">Auditor has determined that Standard provision 115.34(c) is non-compliant</p> <p data-bbox="252 1142 566 1176"><b>CORRECTIVE ACTION:</b></p> <p data-bbox="252 1187 1428 1265">Agency to provide NIC certification for the Investigator who conducted the investigation for Case #24.</p> <p data-bbox="252 1310 1476 1388">Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18</p> <p data-bbox="252 1444 893 1478"><b>CORRECTIVE ACTION COMPLETION 12/19/17:</b></p> <p data-bbox="252 1489 1420 1646">On 12/19/17, the PREA Coordinator provided auditor with the NIC special investigator certification for the outstanding sexual abuse investigator identified in standard provision 115.34(c), and 3 investigations. These are the only PREA related investigations that have occurred after 8/25/17. Cases are as follows:</p> <p data-bbox="252 1657 1484 1859">Case #64 - Classified as Staff sexual harassment case, investigated on the date allegation was made by certified sexual abuse investigator from the Jail Crimes Unit. Case was founded to be unfounded as inmate indicated staff was hiding under her bed, was only one assigned to the cell. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.</p> <p data-bbox="252 1870 1484 2027">Case #65 - Classified as Consensual sex abuse, investigated on date allegation was made by certified sexual abuse investigator from the Jail Crimes Unit. Case was found to be unfounded as inmate claimed to be sexually assaulted by a ghost. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.</p> <p data-bbox="252 2038 1460 2161">Case #67 - Classified as Sexual Harassment by inmate, investigated on date of allegation by certified sexual abuse investigator from the Jail Crimes Unit. Case was found to be unsubstantiated and victim was rehoused. Incident Review was scheduled but inmate victim</p>

was released from custody 10 days prior to the Incident Review being held. Auditor has determined based upon the PREA cases initiated after the interim report, that agency/facility protocols for handling PREA cases whether they be sexual abuse or sexual harassment allegations, are investigated by the Jail Crimes Unit special investigators. Auditor has determined that agency meets Standard 115.71.

<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates all staff, contractors &amp; volunteers who supervise or come in contact with inmates will receive PREA training which consists of the 10 criteria identified with the badge staff training. Agency indicates 61 medical and mental health practitioners who work regularly at the facility who received training, and indicate 100% % have received PREA training. Interview with Medical and Mental Health Staff indicate they have received training on all 4 criteria outlined in Standard provision 115.35(a). Most of the training received was addressed during their professional certification training in addition to the PREA training. Review of training records verify that all medical and mental health practitioners who work regularly at the Elmwood Women’s facility have been trained.</p> <p>N/A - Medical staff at this facility does not conduct forensic examinations.</p> <p>Agency indicates 61 medical and mental health practitioners who work regularly at the facility who received training, and indicate 100% % have received PREA training. Agency provided random selection of 28 PREA training acknowledgements for Medical &amp; Mental Health staff to verify compliance with this Standard provision.</p>

115.41	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>Policy 14.15 mandates an inmate's reassessment within 30 days from inmate's arrival at the facility for risk of victimization or abusiveness based upon any additional relevant information received by the facility since the intake screening. Agency reports 769 inmates entered the facility either through intake or transfer who were reassessed for their risk of victimization or of being sexually abused within 30 days after their arrival at the facility based upon any additional relevant information received since intake. Review of 20 randomly selected inmate screening files from Elmwood Women's housing roster indicates that all inmates have received 30 day reassessment within 30 days of intake. The 30 day screening for Level I and Level II inmates did not begin until 11/15/16, however, all inmates received after that time have been reassessed in accordance with Standard provision 115.41(f). The practice is institutionalized. Interview with Risk Screening Staff and Random Sample of 27 inmates indicate inmates receive both the initial and comprehensive education at intake. PREA Video is played in a loop in the housing units to provide continuous effective PREA education.</p> <p>Policy 14.15 mandates that all those detained or incarcerated be screened for history of sexual abuse at intake to identify history of sexually assaultive behavior and potential vulnerabilities. Over the past 12 months 3260 inmates whose length of stay in the facility for 72 hours or more were screened per PREA mandate. 100% of all inmates whose length of stay in the facility for 72 hours or more were screened. 72 hour screening is conducted at the Main Jail facility. Interview with random sample of 27 inmates indicate they were screened by Classification after booking. Review of random sample of 20 screening files indicate all received screening from classification within 72 hours of intake.</p> <p>Policy 14.15 mandate classification staff to identify those inmates who have experienced sexual victimization through the use of the Classification Supplemental PREA Worksheet. Auditor was provided a copy of the PREA Worksheet which acts as an objective screening instrument in conjunction with the intake and booking forms for the classification officer to make a determination and conclusion as to how to house and program each individual inmate and protect him or her from sexual victimization. Review of 20 randomly selection of inmate screening files from Elmwood Women's housing roster indicate each inmate has been screened using the Classification Supplemental PREA Worksheet. Each worksheet has determination made for housing placement and any other risk and needs based upon the interview with the inmate from intake, booking medical, mental health and classification. The intake classification worksheet provides for 9 of the 10 criteria identified in Standard provision 115.41(d). Agency does not honor holding an individual solely for immigration purposes due to County Policy and approved by the Board of Supervisors of the County of Santa Clara per Board Policy 3.54 for Civil Immigration Detainer Requests, therefore Criteria #10 is not included in the Classification Assessment PREA Worksheet. Review of Screening instrument indicates prior acts of sexual violence, prior convictions for violent offenses and history of prior institutional violence or sexual abuse is considered when assessing inmates for risk of being sexually abusive. Interview with staff responsible for risk screening mirror's the above information in their responses.</p> <p>Policy 14.15 mandates continual risk assessment for all inmates will be conducted upon each report, referral and incident of abuse or receipt of additional information that may affect the inmate's risk of sexual victimization or abusiveness. Review of 20 randomly selected inmate</p>

screening files from Elmwood Women's housing roster indicates that all inmates have received 30 day reassessment within 30 days of intake.

Policy 14.15 specifically prohibits disciplining inmates for refusing to answer or for not disclosing complete information in response to questions asked regarding sexual victimization or abusiveness. Interview with Risk Screening Staff indicate inmates are not disciplined for not answering questions or disclosing information as it relates to the Classification PREA questions.

115.42	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates all inmates shall be assessed during an intake screening, Classification interview and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive towards other inmates. Information from the risk screening will be used to separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The Risk Screening Instrument information is considered to inform for housing and programming with the goal of inmate safety in mind. Interview with PREA Compliance Manager and Risk Screening Staff indicate risk screening information is utilized for housing and programming assignments. Review of random sample of 20 inmate screening files indicate classification decisions on the screening instrument after input from intake/booking, medical, mental health and interview with the inmate.</p> <p>Policy 14.15 states "Appropriate classification and housing assignments shall be made based on the information received/discovered during the screening and file review". Auditor reviewed 20 randomly selected screening files from the facility housing roster and verified written documentation from Screening Staff on the Objective Screening Instrument and also on Classification Case Notes related to answers gleaned from the screening instruments, Classification Officer observations and any information received from Medical &amp; Mental Health practitioners to make individual determinations for each inmate with regards to housing and programming assignments.</p> <p>Policy 14.15 complies with Standard provision 115.42(c) with regards to decisions based on case by case evaluation for LGBTI inmate housing, programming and placement. Interview with Transgender inmate indicated Classification &amp; Psych asked questions about her safety within the facility. The inmate was placed in a Protective Custody housing unit for protection based on the information provided. The inmate has no problem with the current housing placement and has access to programming.</p> <p>Policy 14.15 mandates transgender &amp; intersex inmates be reassessed at least twice a year to review any threats to safety experienced by the inmate. Interview with PREA Compliance Manager indicates Transgender and Intersex inmates are reassessed at least twice a year to review any threats to safety experience by the inmate. Interview with Risk Screening Staff indicates the updated electronic Jail Management System provides for alerts 25 days prior to the 30 day reassessment deadline and every 6 months for Transgender inmates from the date of intake. Transgender inmates are usually reassessed every 30 days and more should they require mental health treatment. Currently housed Transgender inmate has only been incarcerated for 19 days since intake at the date of the on-site audit. Inmate indicates her 72 hour screening and PREA education was completed at intake. Followup review of PREA education acknowledgement form verifies her statement.</p> <p>Policy 14.15 mandates that a transgender or intersex inmate's own views with respect to his or her own safety will be given serious consideration. Interview with PREA Compliance Manager and Risk Screening Staff indicate a Transgender or Intersex inmate's own views with respect to his or her own safety shall be give serious consideration absent concerns over safety and security of the institution and the inmate. Interview with Transgender inmate indicates she was initially housed in a Level 1 dorm setting. Classification rehoused her in a higher level PC housing unit due to the seriousness of her offense. She indicates she initially wanted to remain</p>

in the initial housing placement, however, during the interview Auditor asked where she wished to be housed and she responded that she is feeling sexually safe and comfortable in the current housing unit, she is going to the yard and programming.

Policy 14.15 mandates transgender and intersex inmates shall be given the opportunity to shower separately from other inmates. Interview with PREA Compliance Manager and Risk Screening Staff indicate a Transgender or Intersex inmate has the opportunity to shower separately from other inmates. Observation of Elmwood Women's Facility verifies single showers with privacy doors available for that purpose. Showers are under direct supervision of staff. Interview with Transgender inmate verifies the opportunity to shower separately from other inmates.

115.43	<p><b>Protective Custody</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Policy 14.15 mandates the prohibition of placing inmates at high risk of sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. Facility will not hold the inmate in involuntary segregated housing for more than 24 hours if an immediate assessment has not been conducted. No inmates at risk of sexual victimization were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. Interview with Facility Commander indicates Agency prohibits placement of inmates at high risk for sexual victimization in involuntary segregated housing unless all available alternatives have been made and an immediate assessment of all available alternatives are conducted.</p> <p>Policy 14.15 mandates inmates placed in involuntary segregated housing for the purpose outlined in standard provision 115.43(a), shall have access to programs, privileges, education &amp; work opportunities to the extent possible. Any restrictions to programs will be documented as to reason the limitation(s) are in place and duration of limitation. Interview with Staff who supervise inmate in segregated housing indicates there have been no housing placement for inmates at high risk for sexual victimization over the past 12 months.</p> <p>In the past 12 months, there have been no involuntary assignment of inmates to segregated housing for longer than 30 days while awaiting alternative placement. Interview with Facility Commander and Staff who Supervise Inmates in Segregated Housing indicates Agency prohibits placement of inmates at high risk for sexual victimization in involuntary segregated housing unless all available alternatives have been made and an immediate assessment of all available alternatives are conducted. Inmates are moved within 24 hours if the case arises. Agency reports in the past 12 months, there have been no involuntary assignment of inmates to segregated housing for longer than 30 days. There is no documentation or electronic files of inmates at risk of sexual victimization held in involuntary segregated housing in the past 12 months.</p>
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115.51	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 provides multiple internal ways for inmates to privately report sex abuse, sex harassment or retaliation by other inmates or staff via confidential letter to the Sheriff, Undersheriff, Facility Captain or Internal Affairs Unit. Contact information is provided to inmates through the inmate handbook and the Sexual Assault Awareness Pamphlet. Policy 14.15 provides several methods for inmates to report abuse or harassment to a public or private entity that is not part of the Agency. Agency provided Auditor with copy of Inmate Rule Book Sexual Awareness Pamphlet and PREA posters are all provided to inmates in English, Spanish and Vietnamese. The Inmate Rulebook outlines the inmate's right to be free from sexual abuse and sexual harassment, provided at intake. The Sexual Awareness Pamphlet outlines contact information to report sexual abuse and obtain advocacy for emotional support, provided at intake. The PREA posters outline the limits of confidentiality, monitoring and contact information for outside services for reporting allegations of sexual abuse, placed throughout the facility accessible to both inmates and staff. Policy, Handbook, and Pamphlet provides contact information with YWCA confidential non-monitored phone contact, Santa Clara County Human Relations Office, Department of Homeland Security. Santa Clara County is a Safe Haven County &amp; prohibited from housing inmates detained solely for civil immigration purposes, however, Policy mandates Agency provide access for immigrants held on local or federal charges to contact the Relevant Consulate.</p> <p>Policy 14.15 provides staff method of externally reporting incidents of sexual abuse, sexual harassment including 3rd party &amp; anonymous reports through the Dept. of Fair Employment and Housing (DFEH) &amp; Federal Equal Employment Opportunity Commission (EEOC). Interview with random sample of 20 staff indicate 15 of the 20 know how to privately report sexual abuse/harassment of inmates through the Rape Crisis Hotline, outside law enforcement agencies and Santa Clara County Human Resources. Agency has not provided Auditor with method of providing or training staff of private reporting contact information.</p> <p>Auditor has determined that Standard provision 115.51(d) is non-compliant.</p> <p><b>CORRECTIVE ACTION:</b></p> <ol style="list-style-type: none"> <li>1) Agency to provide Auditor methods staff are informed of how they can privately report sexual abuse/harassment of inmates.</li> <li>2) Agency to provide Auditor with verification all staff have been trained on methods of private reporting of sexual abuse/harassment of inmates</li> </ol> <p>Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18</p> <p><b>CORRECTIVE ACTION COMPLETION 12/6/17:</b></p> <p>During 12/6/17 90-day on-site status review, auditor interviewed 6 custody staff. All 6 interviewees indicate they have been trained either a few weeks ago in Jail Orientation, Correctional Officer Academy or both that staff can privately report allegations of sexual abuse to EEOC or San Jose PD. PREA Coordinator provided auditor with PREA I Sexual Assault &amp; PREA II Sexual Harassment update web-based training which served as staff</p>

refresher/orientation training. These courses were conducted between 7/31/17 and 8/19/17. 337 custody staff signed the training rosters provided by the PREA Coordinator to include electronic verification from the training unit. During the training, staff are provided scenarios and graded on questioned responses during the training. Agency has satisfied Standard 115.51.

115.52	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 &amp; Pollicy 14.05 indicates Agency is not exempt from this Standard provision. Agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse.</p> <p>Policy 14.15 prohibits imposition of a time limit on when an inmate submits a grievance regarding an allegation of sexual abuse. Inmates are not required to use an informal grievance process or otherwise attempt to resolve with staff any alleged incident of sexual abuse. Inmate Handbook (Revised June 2011) states “Grievances concerning any allegations of sexual harassment, sexual abuse or sexual misconduct by staff or inmates will also be considered a priority as well. If you are alleging sexual harassment, sexual abuse or sexual misconduct by staff or another inmate, you do not have to use any informal grievance process to voice your concerns. You may go straight to the formal grievance process. There will be no time limitations imposed on when you can submit a grievance concerning sexual harassment, sexual abuse or sexual misconduct.” During On-Site facility review, Auditor observed locked Grievance boxes throughout the facility and located in every housing unit at the Elmwood Main Men’s facility and key locations at the Ranch facility. Interview with upper-level staff, custody staff and inmates all indicate Grievances are picked up by Shift Sergeants at least once per shift.</p> <p>Policy 14.15 prohibits inmates submitting grievance of sexual abuse from having to submit said grievance to a staff member who is the subject of the complaint &amp; such grievance will not be referred to the staff member who is the subject of the complaint. Revised inmate handbook which informs inmates of the updated PREA related grievance procedures on page #9. Handbook includes narrative which states inmates are not required to use the informal process for PREA related grievances and no time limit to submit PREA related grievances. Emergency grievances are handled as a priority. agency has installed locked grievance boxes in all housing units and along the hallways of the south segregated housing unit for inmates to anonymously submit grievances. Only the shift sergeants have access to the locked boxes and review grievances on each shift to refer to proper authorities for resolution.</p> <p>Policy 14.15 complies with Standard provision 115.52(d) and provides for Agency issuing grievance decision in accordance with the Standard provision. In the past 12 months, 4 grievances were filed that alleged sexual abuse/harassment. Agency alleges written responses were provided within 90 days. Review of each of the 4 grievances indicate the written responses were provided within 30 days. 2 of grievances informed the inmate that the case was referred to the Special Investigations Unit for review and followup. Auditor reviewed the Investigations that were to follow and each one was conducted appropriately. One grievance was a report of sexual abuse. Case was immediately assigned to a Special Investigator date of allegation and was investigated promptly. Inmate has been notified as to the outcome of the investigation and case is currently pending incident review.</p> <p>No 3rd party reports or declination of 3rd party assistance information. Policy 14.15 mandates that should a third party file 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. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate’s decision.</p>

Policy 14.15 mandates that after staff receives an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. Agency reports that in the past 12 months, there have been no imminent sexual abuse grievances filed.

<b>115.53</b>	<b>Inmate access to outside confidential support services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates inmate access to outside victim advocates for emotional support services via I/M Sex Assault Pamphlet in 3 languages &amp; PREA posters throughout the facility, in every housing unit and next to inmate phones. Inmates are not held solely for civil immigration per County Policy. Interview with random sample of inmates &amp; inmate who reported sexual abuse indicate access is provided to outside victim advocates through toll free number identified on wall of housing unit near phones to YWCA Rape Crisis. Auditor verified inmate statements during on-site audit review of each housing unit.</p> <p>Sexual Assault Awareness Pamphlet and Inmate Handbook are provided to all inmates at intake. They provide reporting rules governing confidentiality, disclosures and monitoring. PREA Posters available in every housing unit and general areas throughout the facility provide same information. Agency reports that the #99 speed dial in inmate phones used to connect to outside agencies is not monitored or recorded. Interview with random sample of inmates &amp; inmate who reported sexual abuse indicate their belief that all phones are monitored. PREA Posters, Inmate Handbook and Sexual Awareness Pamphlet, which provide confidential phone contact information to Rape Crisis Center, include narrative indicating that the contact is not monitored by Agency. When auditor used the toll-free access number, the call went straight through to the Rape Crisis Center and was answered by an advocate who indicated the phone call was not monitored.</p>

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Agency has established multiple methods to receive 3rd party reports of sexual abuse and sexual harassment by writing a confidential letter to the Facility Captain, write confidential letter to Chief of Corrections or contacting the Internal Affairs Unit and submitting a complaint per Policy 14.15. Methods are provided publicly on Agency website and on 3rd party posters in public lobbies and visiting areas. 3rd party posters are in English, Spanish and Vietnamese.</p>

115.61	<b>Staff and agency reporting duties</b>
	<p data-bbox="252 170 928 203"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1477 954">Policy 14.15 requires staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual assault, sexual misconduct, retaliation or sexual harassment against inmates. This includes any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All incidents will be reported whether or not the incident occurred within a Santa Clara County Department of Correction facility or any other agency. Interview with random sample of staff verifies their training &amp; education related to mandatory reporting per Policy. Agency provides each custody staff member with a PREA Quick Reference card to be carried on their person at all times during shift which provides 1st responder responsibilities in the event of an allegation of sexual abuse. During formal and informal interviews of staff, Auditor randomly requested to see the card. Each staff member proudly displayed the card from their pockets. Staff responded to the Auditor's 1st Responder questions without looking at the card, which verifies the custody 1st Responder protocol is institutionalized and Agency exceeded the requirements of Standard 115.61 to ensure Staff had all the tools necessary to respond to an allegation of sexual abuse/harassment or imminent sexual abuse allegation.</p> <p data-bbox="252 969 1453 1126">Policy 14.15 mandates staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary to report sexual abuse on need to know basis. Interview with random staff verifies their training &amp; education with regards to providing information related to a sex abuse report only to staff on a need to know basis.</p> <p data-bbox="252 1142 1477 1731">Policy 14.15 mandates medical and mental health practitioners to report sex abuse and inform inmates of practitioner's duty to report &amp; inform of limitations of confidentiality at the initiation of services. Agency provided the Santa Clara Valley Health &amp; Hospital System adult custody health services correction plan for the PREA deficiencies. Interview with Medical and Mental Health Director indicates this plan, called the notice of privacy practices (NPP), mandates medical and mental health practitioners to provide information regarding reporting obligations and confidentiality as part of receiving information about the notice of privacy practices at the intake/booking stage. A copy of this mandate is posted on the wall in the booking and clinic areas. For reporting prior sexual victimization that did not occur in an institutional setting, medical and mental health practitioners will have the inmate sign a HIPPA compliant authorization form before incident is reported to custody bureau/sheriff's office. Inmate will sign the notice of privacy practices acknowledgement at booking. Attachment b of this mandate outlines the responsibility of medical and mental health practitioners to comply with standard provision 115.61(c).</p> <p data-bbox="252 1747 1477 2157">Policy 14.15 indicates that if the victim is under age 18 or vulnerable adult, Agency shall report the allegation to the designated state or local services agency under applicable mandatory laws. Standard provision 115.61 and Agency policy to indicate that an investigation is immediately conducted via Internal Affairs and Criminal division investigative units &amp; treated the same as any other sex abuse investigation using Agency protocols. There have been no allegations of sexual abuse by victims under age of 18 years or vulnerable adults. Interview with Facility Commander and PREA Coordinator indicate these cases are referred to Jail Crimes unit for investigation and responded to as we would any other sexual abuse investigations. In the case of an 18 year old victim, CPS would be notified and in the case of a vulnerable adult, proper notifications by law, such as Elder Abuse Agency, would be notified.</p>

115.62	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates staff to immediately report any knowledge that an inmate is subject to substantial risk of imminent sexual abuse. The Agency shall take immediate action to protect the inmate. Agency reports no inmate was subject to substantial risk of imminent sexual abuse over the past 12 months. Interview with Undersheriff, Facility Captain &amp; random sample of staff verifies the staff training and education in compliance with Standard provision 115.62(a). All staff interviewed indicated they would immediately separate victim from alleged abuser, contact Supervisor &amp; conduct written documentation to request Classification rehouse either the victim or alleged abuser.</p>

115.63	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates that Sergeants are responsible, upon receiving an allegation that an inmate was sexually abused while confined at another facility, to notify the Captain in charge of the facility where the report was generated. The Facility Captain will notify the head of the facility or an appropriate person where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation and provide the reported information. The Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator. Agency reports that in the past 12 months, no allegations of sexual abuse while confined at another facility have been received.</p> <p>Policy 14.15 mandates the Facility Captain will notify the head of the facility or an appropriate person where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation and provide the reported information. The Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator.</p> <p>Policy 14.15 mandates the Facility Captain will notify the head of the facility or an appropriate person where the alleged abuse occurred as soon as possible, but no later than 72 hours after receiving the allegation and provide the reported information. The Captain will ensure that the information and the proper notifications are recorded and reported to the PREA Coordinator. Agency reported 11 sexual abuse/harassment investigations have been conducted over the past 12 months. Agency has provided Auditor with notifications to all 11 inmates who alleged sexual abuse/harassment.</p> <p>Policy 14.15 mandates the Office of the Sheriff/Department of Correction will immediately respond to allegations, fully investigate reported in-custody incidents ( in our facilities as well as reported to the Department by another facility), pursue disciplinary action, and refer for criminal investigation and prosecution of those inmates who perpetrate sexual misconduct and threats of sexual assault or intimidation. Agency reports that no allegations of sexual abuse have been received from other facilities during the past 12 months. Interview with Undersheriff &amp; Facility Captain indicate Policy procedures are followed to the letter once an allegation of sexual abuse is received from another facility. Internal Affairs and Jail Criminal Investigators are promptly notified and investigation is conducted immediately.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates upon learning of an allegation that an inmate was sexually abused, deputies/officers shall be required to immediately notify the on-duty Supervisor, separate the alleged victim and abuser; identify and separate any witnesses; preserve and protect any crime scene until steps can be taken to collect all evidence; if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. During the on-site audit Agency reported there have been 4 allegations of sexual harassment and 7 allegations that an inmate was sexually abused over the past 12 months at the Elmwood Women's Facility. There are no reports that a security staff member responded to separate the alleged victim &amp; abuser during the 11 incidents. Of the 11 incidents, staff were not notified within a time period that still allowed for the collection of physical evidence. None of the 11 incidents were timely for protecting the crime scene, ensured victim and abuser did not take actions to destroy evidence. Agency provides each custody staff member with a PREA Quick Reference card to be carried on their person at all times during shift which provides 1st responder responsibilities in the event of an allegation of sexual abuse. During formal and informal interviews of staff, Auditor randomly requested to see the card. Each staff member proudly displayed the card from their pockets. Staff responded to the Auditor's 1st Responder questions without looking at the card, which verifies the custody 1st Responder protocol is institutionalized and Agency exceeded the requirements of Standard 115.61 to ensure Staff had all the tools necessary to respond to an allegation of sexual abuse/harassment or imminent sexual abuse allegation. Interviews with inmates who alleged sexual abuse and harassment indicated action was prompt by staff and they were not only informed an investigation was being conducted but was also provided written notification of the outcome of the investigation.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 provides for written response protocol specific to Santa Clara County Elmwood Women's facility, which provides for coordinated actions taken in response to an incident of sexual abuse among staff 1st responders, medical and mental health practitioners, investigators and facility leadership. The protocol also includes non-badge staff who respond to allegations of sexual abuse. Interview with Facility Captain indicates knowledge of the facility plan to coordinate actions among staff 1st responders &amp; supporting staff in response to an incident of sexual abuse.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Agency reports no collective bargaining agreement has been entered into since the last PREA audit which was 2014 for the Elmwood Women's Facility.

115.67	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates all incidents of sexual abuse, sexual harassment and retaliation shall be reported to the PREA Coordinator. Agency provided auditor with the name, title and department of staff member who monitors for possible retaliation. The PREA Coordinator is responsible for monitoring retaliation.</p> <p>Policy 14.15 outlines multiple protection measures for inmates or staff who fear retaliation. Inmates who fear retaliation are provided emotional support through Alameda County Health Services Mental Health referrals. Interviews with Undersheriff, Facility Captain, PREA Coordinator &amp; inmate who reported a sexual abuse all verify Agency's protection measures for inmates and staff who fear retaliation. Both inmates and staff are monitored to ensure they are not experiencing additional retaliation, check on their well-being and to ensure they are offered emotional support for at least a 90 day period. Inmates can contact the Jail Observer program or the County Human Relations Council if they choose to seek monitoring outside of Agency. Additional referral measures provided for inmates inside the Agency is provided through the PREA video, posters inside facility, mental health practitioners, chaplaincy and through the grievance process. Staff are referred to the Employee Assistance Program (EAP) per union contract. Agency is kept apprised of any ongoing retaliation.</p> <p>Policy 14.15 mandates that following the report of sexual abuse, Classification Unit and Mental health will monitor the conduct of inmates of sexual abuse for at least 90 days &amp; continue to monitor beyond 90 days if the initial monitoring indicates the continued need. Agency reports there have been no incidents of retaliation over the past 12 months. Interview with Facility Captain indicate any allegation of retaliation is investigated immediately through Internal Affairs &amp; Jail investigative division. PREA Compliance manager indicates he documents monitoring efforts. Over the past 12 months there have been no incidents of retaliation.</p> <p>Policy 14.15 mandates that monitoring shall also include periodic checks. Interview with PREA Coordinator, responsible for monitoring retaliation, indicate face-to-face contacts are made during the periodic status checks which usually occur twice monthly.</p> <p>Policy 14.15 provides for any individual who cooperates with an investigation expresses fear of retaliation, Agency shall take steps to protect that individual against retaliation. Interview with Undersheriff and Facility Captain indicates in the case of an inmate, he/she is engaged and informed regarding the monitoring process. They are moved to a safe environment (housing unit) and referred to Mental Health to provide emotional support. Monitoring conducted by classification for 30 to 60 days to ensure no retaliation is occurring. PREA Compliance Manager also monitors. In the case of Staff, they are monitored constantly by PREA Coordinator and EAP. There is continual followup and disciplinary action taken upon the perpetrator. Monitoring is established through continual contact. Teams are educated via squad meetings to after each other and to take retaliation seriously.</p>

<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates that any use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of Standard 115.43. Over the past 12 months no inmates who alleged to have suffered sexual were held in involuntary segregated housing awaiting completion of an assessment.</p>

115.71	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates that all investigations shall be done promptly thoroughly and objectively including anonymous and 3rd party reporting. Interview with Investigative Staff indicate sexual abuse investigations are initiated immediately upon notification to include 3rd party reports.</p> <p>Policy 14.15 mandates that only criminal investigators who have received special training in the investigating sexual abuse will conduct sexual abuse investigations. Agency has identified 8 sexual abuse investigators. 7 investigators have provided certificates of completion of the NICIC or Peace Officer Standards of Training ICI-2 Investigation in Correctional Setting course. Auditor is awaiting training verification for the remaining 1.</p> <p>Policy 14.15 mandates that investigators shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecution. Interview with Investigative Staff indicate they employ the services of the Agency Crime Scene Investigation Unit to secure crime-scene evidence and Forensic Nurses from the hospital to obtain and secure forensic evidence.</p> <p>Policy 14.15 mandates compelled interviews are conducted only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. Interview with Investigative Staff indicate Criminal Investigative Unit does not conduct compelled interviews. Interview with Internal Affairs Unit indicate they conduct compelled interviews only with the approval of prosecutor.</p> <p>Policy 14.15 mandates that the credibility of an alleged victim, suspect or witness shall be assessed on an individual bases &amp; shall not be determined by the person's status as inmate or staff. Agency prohibits use of polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. Interview with Investigative Staff indicate credibility is established through the investigative process to determine if there is enough evidence to sustain the allegation.</p> <p>Policy 14.15 mandates that administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse and/or sexual harassment. Interview with Internal Affairs staff indicate investigators use policy &amp; procedure violation found during the investigation to make a determination on findings. All reports are written and documented. Interview with Internal Affairs Investigative Staff indicate they review policies and procedures to determine if violation of either or both. Discipline or corrective action may be taken due to the violation. Investigations are documented in written reports and include any information gleaned from a documented Criminal Investigation, to include interviews, forensic examinations, additional reports from other investigations, policy violations, findings and physical evidence.</p> <p>Policy 14.15 mandates that all criminal investigations shall be documented in a written report, containing a thorough description of the physical, testimonial, and documentary evidence. Documentary evidence will be attached to the report where feasible. All reports are documented providing for victim &amp; suspect information, evidence collected, recordings of interviews, video/photo evidence, forensic evidence, witness statements, evaluation of date &amp; findings. Auditor's review of the 4 administrative and 7 criminal sexual abuse/harassment investigations, each are documented in a written report in accordance with Standard provision 115.71(g). Interview with both administrative and criminal investigative staff indicates each investigation is documented in a written report which contains description of physical,</p>

testimonial, and documentary evidence and attaches copies of all documentary evidence. All reports are documented providing for victim & suspect information, evidence collected, recordings of interviews, video/photo evidence, forensic evidence, witness statements, evaluation of date & findings. Agency indicates 2 Agency-wide substantiated allegations of conduct that appear to be criminal were referred for prosecution since last PREA Audit which occurred in 2014. IAuditor reviewed all 11 investigations from the Elmwood Women's Facility verifies that two of them were referred to the DA for prosecution. Interview with criminal investigative staff and review of the investigative files indicates the DA declined to prosecute on both cases.

Policy 14.15 mandates the Agency shall retain all written investigative reports for as long as the victim and the alleged abuser are incarcerated, +5 years. This policy is mandated for cases involving both inmate on inmate and staff on inmate sexual misconduct.

Policy 14.15 mandates the departure of the alleged abuser or victim from the employment or control of the department shall not provide a basis for terminating investigation. Interview with Investigative Staff indicate the departure of Staff, victim or inmate perpetrator from the facility or Agency does not provide a basis for terminating the investigation. The investigation continues to completion and referred to DA office for prosecution if sustained as a possible criminal matter.

Auditor is not required to audit Standard provision 115.71(k).

Auditor has determined that Standard provision 115.71(b) is non-compliant

#### CORRECTIVE ACTION:

Agency to provide Auditor with certificate to verify Investigator who investigated Case #24 has completed sexual abuse investigation in a confinement setting course.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18.

#### CORRECTIVE ACTION COMPLETION 12/19/17:

On 12/19/17, the PREA Coordinator provided auditor with the NIC certification for the outstanding special investigator and 3 investigations. These are the only PREA related investigations that have occurred after 8/25/17. Cases are as follows:

Case #64 - Classified as Staff sexual harassment case, investigated on the date allegation was made by certified sexual abuse investigator from the Jail Crimes Unit. Case was founded to be unfounded as inmate indicated staff was hiding under her bed, was only one assigned to the cell. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.

Case #65 - Classified as Consensual sex abuse, investigated on date allegation was made by certified sexual abuse investigator from the Jail Crimes Unit. Case was found to be unfounded as inmate claimed to be sexually assaulted by a ghost. Inmate was referred to mental health for treatment. No Incident Review Board scheduled as case was unfounded.

Case #67 - Classified as Sexual Harassment by inmate, investigated on date of allegation by certified sexual abuse investigator from the Jail Crimes Unit. Case was found to be unsubstantiated and victim was rehoused. Incident Review was scheduled but inmate victim was released from custody 10 days prior to the Incident Review being held.

Auditor has determined based upon the PREA cases initiated after the interim report, that agency/facility protocols for handling PREA cases whether they be sexual abuse or sexual

harassment allegations, are investigated by the Jail Crimes Unit special investigators certified to conduct sexual abuse investigations in a confinement setting. Auditor has determined that agency meets Standard 115.71.

115.72	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Policy 14.15 mandates that agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interview with Investigative Staff indicate they impose no standard higher than preponderance of the evidence for sexual abuse/harassment cases.

115.73	<b>Reporting to inmates</b>
	<p data-bbox="252 170 896 203"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 248 523 282"><b>Auditor Discussion</b></p> <p data-bbox="252 327 1481 831">Policy 14.15 mandates Agency inform the alleged victim whether the allegation was determined to be substantiated, unsubstantiated or unfounded. Agency indicates that in the past 12 months, 11 criminal/administrative investigations of alleged inmate sexual abuse were completed by Agency. 9 were notified as to the outcome of the investigation, 1 was deemed consensual sex and not PREA related, and 1 was not notified in writing with regards to the results of the investigations. Agency provided copies of the documented notifications. Agency has provided Auditor with copies of written notifications provided to inmates of all 11 sexual abuse/sexual harassment cases. Interview with Facility Captain &amp; Investigative staff indicate the victim is notified of the outcome of the investigation to inform them of the findings. Criminal investigators indicate Crimes Unit notifies the victim and Internal Affairs indicate they are legally mandated to provide the victim with disposition of any investigation in accordance with Penal Code section 832.5(c).</p> <p data-bbox="252 842 1458 913">N/A - Standard provision 115.73(b) does not apply to this Agency as they are responsible for conducting both administrative and criminal investigations.</p> <p data-bbox="252 925 1481 1384">Policy 14.15 mandates that following an inmates allegation that a staff member has committed sexual abuse against the inmate, Agency shall subsequently inform the inmate whenever staff member is no longer posted in inmate's unit, Agency learns staff member has been indicted, Agency learns staff member has been convicted of charge related to sexual abuse in the facility. Agency reports 2 substantiated allegations of sex abuse committed by a staff member against an inmate in an agency facility in past 12 months. Agency provided Auditor with inmate notifications in both cases which inform victims of the outcome of the investigations. One of the investigations which involved a contractor, was unsubstantiated. The other criminal investigation was found to be substantiated, however, the staff member works in the Main Jail, where the incident occurred, not the Elmwood Women's Facility where inmate victim is housed.</p> <p data-bbox="252 1395 1469 1686">Policy 14.15 mandates that following an inmates allegation that he or she has been sexually abused by another inmate, Agency shall subsequently inform the alleged victim whether the allegation was determined to be substantiated, unsubstantiated or unfounded and whenever Agency learns the inmate has been indicted, Agency learns the inmate has been convicted of charge related to sexual abuse in the facility. A review of notification letters verifies Agency informs the victim of the outcome of the investigation but also as to the whereabouts of the perpetrator.</p> <p data-bbox="252 1697 1477 1899">Policy 14.15 mandate all such notifications are documented. In past 12 months, Agency reports 11 notifications were provided to inmates and all were documented. 10 documented notifications were provided to auditor for verification. One notification was deemed consensual sexual misconduct and the notification was made verbally as to the outcome of the investigation and documented in the investigative notes.</p> <p data-bbox="252 1910 906 1944">Auditor is not required to audit provision 115.73(f).</p>

115.76	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates and discipline resulting from violations of the sexual abuse or sexual harassment policies 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 histories. All staff terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of being terminated, shall be reported to the law enforcement agencies of jurisdiction, unless the activity was clearly not criminal.</p> <p>Policy 14.15 mandate all staff terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of being terminated, shall be reported to the law enforcement agencies of jurisdiction, unless the activity was clearly not criminal. Agency reports that in the past 12 months 1 staff from facility who have violated Agency sexual abuse or sexual harassment policies per Agency. The case was referred to the DA and the DA declined to file charges due to insufficient evidence. In the past 12 months, no staff from the facility was terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies.</p> <p>Policy 14.15 mandates that any discipline resulting from violations of the sexual abuse or sexual harassment policies 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 histories.No disciplinary sanctions taken against staff for sexual abuse violations in the past 12 months.</p> <p>Policy 14.15 mandate all staff terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff in lieu of being terminated, shall be reported to the law enforcement agencies of jurisdiction, unless the activity was clearly not criminal. Agency reports that In the past 12 months, no staff from the facility have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies.</p>

115.77	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates any contractor or volunteer who engages in sex abuse or sex harassment shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. In the past 12 months 1 of the contractors or volunteers have been reported to law enforcement agencies for allegedly engaging in sexual abuse of inmates. Investigative case provided to Auditor for review. In this case, the contractor's gate clearance was immediately suspended pending outcome of the investigation. The case was unsubstantiated and referred to the DA for prosecution. The DA declined to prosecute and the contractor's gate clearance was reinstated.</p>

115.78	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandate inmates who engaged in inmate-on-inmate sexual abuse or were found guilty of inmate-on-inmate sexual abuse shall be subject to disciplinary sanctions pursuant to a formal disciplinary process. Agency reports that in the past 12 months there have been 8 administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. Review of all 11 sexual abuse/harassment investigations, Auditor determined there were 4 administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility. Policy 14.15 mandates Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Interview with Facility Captain indicates sanctions are consistent based upon the investigative findings, inmate disciplinary history and history of mental illness or disability.</p> <p>Policy 14.15 indicates that the disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Interview with Facility Commander indicates the disciplinary process shall consider whether an inmate 's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. Review of disciplinary actions following the outcome of 3 administrative investigations involving inmate on inmate sexual abuse and 1 administrative investigation involving inmate on inmate consensual sexual misconduct indicated any sanctions as to the outcome of the administrative disciplinary hearings are appropriate and fair. Inmates involved did not possess mental disabilities nor did they suffer from mental illness.</p> <p>Policy 14.15 indicates that if available, therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Interview with Medical and Mental Health Staff indicates there are no specific programs for predators. If they were to request a counseling program to address their predatory issues they can be referred to a regular practitioner who runs the Trauma Recovery Group which is conducted inside the facility.</p> <p>Policy 14.15 indicates an inmate may be disciplined if found guilty of sexual assault upon a staff member or sexual contact with a staff member without consent. Agency reports that in the past 12 months, no disciplinary actions against inmates for sexual conduct with staff member was conducted.</p> <p>Policy 14.15 mandates that for the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p>

115.81	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates that if, during the intake screening process, it is determined that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Agency indicates that all inmates who disclosed prior victimization during screening were offered a follow up meeting with a medical or mental health professional. Agency reports that in the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Interview with Risk Screening Staff indicates should an inmate disclose any prior sexual victimization during screening, they are referred to Mental Health either before or immediately following Classification. Inmate who disclosed Sexual Victimization at Risk Screening was interviewed and indicated she was referred to Mental Health when she disclosed prior victimization during screening. Auditor reviewed this inmate’s screening record and determined she was in fact referred to Mental Health after Classification and was seen by the Mental Health Practitioner within 2 days of the referral. Auditor had requested a referral roster of all inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner over the past 12 month prior to the on-site audit, however, Agency has not provided the roster as requested.</p> <p>N/A - Standard 115.81(b) does not apply to this facility as it is a Jail, not a Prison.</p> <p>Policy 14.15 mandates that if, during the intake screening process, it is determined that a prison/jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Agency indicates that all inmates who disclosed prior victimization during screening were offered a follow up meeting with a medical or mental health professional. Agency reports that in the past 12 months, 100% of inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner.</p> <p>Policy 14.15 to mandate that information related to sexual victimization or abusiveness is strictly limited to medical and mental health practitioners &amp; other staff necessary to inform treatment plans and security management decisions unless otherwise required by federal, state or local law, in accordance with standard provision 115.81(d). Interview with Medical and Mental Health practitioners indicate medical records are accessed only through the Medical and Mental Health electronic system. They share information only with Classification for housing, programming, safety and security issues and upper management on a need to know basis.</p> <p>PREA Policy 14.15 mandates 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. Policy 14.15 mandates medical and mental health practitioners to report sex abuse and inform inmates of practitioner’s duty to report &amp; inform of limitations of confidentiality at the initiation of services. Agency provided the Santa Clara Valley Health &amp; Hospital System adult custody health services correction plan for the PREA deficiencies. Interview with Medical and Mental Health Director indicates this plan, called the notice of privacy practices (NPP), mandates medical</p>

and mental health practitioners to provide information regarding reporting obligations and confidentiality as part of receiving information about the notice of privacy practices at the intake/booking stage. A copy of this mandate is posted on the wall in the booking and clinic areas. For reporting prior sexual victimization that did not occur in an institutional setting, medical and mental health practitioners will have the inmate sign a HIPPA compliant authorization form before incident is reported to custody bureau/sheriff's office. Inmate will sign the notice of privacy practices acknowledgement at booking. Attachment b of this mandate outlines the responsibility of medical and mental health practitioners to comply with standard provision 115.61(e).

Auditor has determined that Standard provisions 115.81(a)/(c) is are non-compliant.

**CORRECTIVE ACTION:**

1. Agency to provide Auditor with referral roster of all inmates who disclosed prior victimization during screening who were offered a follow-up meeting with a medical or mental health practitioner over the past 12 months.
2. Agency to provide Auditor with documentation to verify Mental Health conducted the followup meeting within 14 days or documentation to verify Inmate declined MH referral.

Auditor to make a 90-day status review by 11/22/17. Agency to complete the corrective action recommendation prior to the 180-day corrective action period deadline of 2/20/18

**CORRECTIVE ACTION COMPLETION 12/19/17:**

On 12/19/17, PREA Coordinator provided auditor with Mental Health Referral Response records on 15 inmates who had been referred to mental health when disclosing prior victimization information during screening over the past 12 months. Mental Health record reviews indicate all inmates referred to mental health at booking received a mental health follow-up within 7 days of intake. Initial intake practitioner documented Inmates who declined referral in the referral records. Agency has satisfied this Standard provision.

115.82	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates Alameda County Health Services shall offer medical and mental health evaluations and timely unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting. The care provided will be consistent with the community level of care. Interview with Medical and Mental Health Staff indicates inmates are provided medical and mental health evaluations and timely unimpeded access to emergency medical treatment and crisis intervention services to all inmates who have been sexually victimized in any correctional setting consistent with the community level of care. Auditor observed the Medical Unit and verifies the care is consistent with the community.</p> <p>Policy 14.15 provides sex abuse response protocol for Santa Clara County Elmwood Complex, which complies with this provision. Agency provided Auditor with SCCJ Evidence Protocol for Elmwood Women's Facility. Interview with Security Staff indicates they follow the written protocol and procedures provided on their 1st Responder cards to take preliminary steps to protect the victim until Medical and Mental Health arrive. Non-Security Staff 1st Responders indicate they separate the victim, immediately contact custody staff and remain to provide emotional support and assistance until Medical and Mental Health practitioners arrive. Medical and Mental Health practitioners are on duty 24/7.</p> <p>Policy 14.15 mandates inmate victims of sexual abuse shall be offered timely information about stds and access to emergency contraception in accordance with professionally accepted standards, where medically appropriate, in compliance with standard provision 115.82(c). Interview with Medical and Mental Health Staff indicates inmate victims of sexual abuse are provided timely information regarding emergency contraception and STD prophylaxis to include followup care without cost to the inmate.</p>

115.83	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates Alameda County Health Services shall offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The care provided will be consistent with the community level of care.</p> <p>Interview with Medical and Mental Health Staff indicate when an inmate is being treated for any medical or mental health issues, there are individual treatment plans that follow them through transfers to other facilities and referrals to community providers upon their release from custody. Interview with Medical and Mental Health Staff indicate when an inmate is being treated for any medical or mental health issues, there are individual treatment plans that follow them through transfers to other facilities and referrals to community providers upon their release from custody. Interview with Medical and Mental Health Staff indicate when an inmate is being treated for any medical or mental health issues, there are individual treatment plans that follow them through transfers to other facilities and referrals to community providers upon their release from custody.</p> <p>Policy 14.15 mandates facility to provide victims of sexual abuse with medical and mental health services consistent with the community level of care. Interview with medical &amp; mental health staff indicate they provide all inmates with level of care consistent with the community. Medical &amp; Mental health records review, determine focused treatment for all inmates. Interview with medical &amp; mental health staff indicate they provide all inmates with level of care consistent with the community. Medical &amp; Mental health records review, determine focused treatment for all inmates.</p> <p>Policy 14.15 mandates that if pregnancy results from sexual abuse by vaginal penetration while incarcerated, such victims shall receive timely and comprehensive information about, and have timely access to, all lawful pregnancy-related medical services. No inmates who reported sexual abuse experienced vaginal penetration while incarcerated. Interview with Medical staff and SAFE/SANE nurse indicates pregnancy tests, treatment, and information are provided to female victims of sexual abuse. None of the female victims of sexual abuse experience vaginal penetration while incarcerated.</p> <p>Policy 14.15 mandates that if pregnancy results from sexual abuse by vaginal penetration while incarcerated, such victims shall receive timely and comprehensive information about, and have timely access to, all lawful pregnancy-related medical services. Inmate victims of sexual abuse by vaginal penetration while incarcerated shall be offered a pregnancy test. No inmates who reported sexual abuse experienced vaginal penetration while incarcerated. Interview with Medical staff and SAFE/SANE nurse indicates pregnancy tests, treatment, and information are provided to female victims of sexual abuse. o inmates who reported sexual abuse experienced vaginal penetration while incarcerated. Interview with Medical staff and SAFE/SANE nurse indicates pregnancy tests, treatment, and information are provided to female victims of sexual abuse. None of the female victims of sexual abuse experience vaginal penetration while incarcerated.</p> <p>Policy 14.15 mandates that inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. No inmates who reported sexual abuse experienced vaginal penetration while incarcerated. Interview with Medical staff and SAFE/SANE nurse indicates pregnancy tests, treatment, and information are provided to</p>

female victims of sexual abuse. Interview with inmate who reported a sexual abuse indicated this Standard provision did not apply to her in his case. Review of investigative records found forensic exam could not be conducted as vaginal penetration was not a factor in this case and the allegation was not received within 72 hours of the alleged incident.

Policy 14.15 mandates treatment services shall be provided without financial cost to the victim inmate regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. Inmates who reported a sexual abuse indicated they were not charged for any services provided.

N/A - Standard provision 115.83 does not apply to this facility as it is a Jail.

115.86	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates a sexual abuse incident review shall be conducted at the conclusion of every sexual abuse investigation. The review will be conducted on all founded and not substantiated case determinations. Reviews will not be conducted on cases with unfounded determinations. Such review shall be conducted within 30 days of the conclusion of the investigation. In the past 12 months, Agency provided Auditor with 2 criminal and 9 administrative investigations conducted over the past 12 months. Agency reports 10 criminal or administrative investigations of alleged sexual abuse completed at the facility, excluding the 1 unfounded incident. Review of 11 criminal &amp; administrative investigation incident Review Board results were provided by Agency. Auditor reviewed 11 Incident Review Board Reports from the Elmwood Women’s Facility . The reports are comprehensive, complete, provide recommendations, if needed, to provide sexual safety for inmates at these facility.</p> <p>Policy 14.15 mandates he review will be conducted on all founded and not substantiated case determinations. Reviews will not be conducted on cases with unfounded determinations. Such review shall be conducted within 30 days of the conclusion of the investigation. In the past 12 months, Agency reports 6 criminal or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents. Review of 11 criminal &amp; administrative investigations, only 8 Incident Review Board results were provided by Agency. 3 cases have recently concluded and are pending IRB scheduling.</p> <p>Policy 14.15 mandates the review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Auditor's review of 8 Incident Review Board summary results verifies compliance with Standard provision 115.86(c).Interview with Facility Commander indicates the Incident Review Team is comprised of upper level management officials with input from staff, investigators, Medical and Mental Health practitioners. Review of Incident Review Team reports verifies compliance with Standard provision 115.86(c).</p> <p>Policy 14.15 mandates the Incident Review Team Summary Report include the following considerations:</p> <ol style="list-style-type: none"> <li>(1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;</li> <li>(2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;</li> <li>(3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;</li> <li>(4) Assess the adequacy of staffing levels in that area during different shifts;</li> <li>(5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and</li> <li>(6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.</li> </ol> <p>Auditor's review of 8 Incident Review Board summary results verifies compliance with Standard provision 115.86(c). On 3/10/17, Elmwood Complex Administration issued a directive</p>

which mandates the enhanced blind spot checks to be conducted every 60 minutes based upon Incident Review corrective action plans and Staffing Plan Review. Interview with Facility Commander, PREA Compliance Manager and member of the Incident Review Team indicates the Incident Review Team considers all 6 criteria as outlined in Standard provision 115.86(d). Review of each Incident Review Team report verifies compliance with the Standard provision.

115.87	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates agency shall collect accurate, uniform data for every allegation of sexual abuse in facilities under its direct control using a standardized instrument and set of definitions. The incident-based data collected shall 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. Agency provided Auditor with completed Survey of Sexual Violence used to update the Annual Report.</p> <p>Policy 14.15 mandates the agency shall aggregate the incident-based sexual abuse data at least annually. Review of Agency Annual Statistical Report from 8/1/15 to 7/31/16 provides statistical data from the Main Jail Facility, Elmwood Men's Facility and Elmwood Women's Facility. Review of Agency Annual Statistical Report from 8/1/14 to 7/31/16 provides aggregated statistical data from the Main Jail Facility, Elmwood Men's Facility and Elmwood Women's Facility.</p> <p>Policy 14.15 mandates agency shall collect accurate, uniform data for every allegation of sexual abuse in facilities under its direct control using a standardized instrument and set of definitions. The incident-based data collected shall 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.</p> <p>Policy 14.15 mandates the agency to maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Data collection includes information from incident-based documents, employee reports, investigation files, and sexual abuse incident reports. Review of agency annual statistical report from 8/1/14 to 7/31/16 provides statistical data from the Main Jail facility, Elmwood Men's Facility and Elmwood Women's Facility, in compliance with standard provisions 115.87(a)/(c) and 115.87(b). Agency provided auditor with 11 incident review reviews completed by the Incident Review Team that was used in their calculations in the Annual Report.</p> <p>N/A - Standard provision 115.85(e) does not apply as Agency does not contract for the confinement of its inmates.</p>

<b>115.88</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates the agency to 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. All 3 criteria as outlined in Standard provision 115.88(a) is included in the policy. Agency provided auditor with Agency-wide Annual Report Chart, which is aggregated data used to be included in the Annual Report as verified during Auditor's review of the 2014-2015 &amp; 2015-2016 Annual Report located on Agency's website. Interview with Undersheriff indicates Agency is lacking with regards to using obtained data to assess &amp; improved effectiveness of its sexual abuse tracking &amp; prevention due to aging computer data system. Agency has obtained funding through a grant to update the current JMS system and obtain an IA-PRO system to collect data in accordance with PREA mandates. The Agency has also obtained approval through the County Board of Supervisors for increased video surveillance in each of the Agency's correctional facilities as a capital project. Interview with PREA Coordinator &amp; PREA Compliance Manager indicates data is collected for the Annual Report currently by hand. Agency is meeting the PREA requirement, however, they need an updated system to better collect and assess the data for the coming year. Review of Annual Report 2015 - 2016 includes aggregated data &amp; corrective action processes. The Annual Report identifies prevention measures taken on behalf of Santa Clara County Sheriff's Office to provide sexual safety for inmates under their supervision.</p> <p>Policy 14.15 mandates that PREA data reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse. Annual Report 2015-2016 review found annual statistical comparisons from 2012 to 2016. The comparisons also identified issues between each year as to why the sexual abuse crimes primarily occur, and included the agency's corrective action recommendations and progress in acting on those recommendations. The 2015-2016 Annual Report is available on the Agency website. The 2016/2017 Annual Statistical Report is not available on the Agency website until after July 2017. On 12/6/17, auditor reviewed the agency website and found the Annual Report for 2016 - 2017 was available. The report identifies inmate reporting and education, annual statistics and definitions, PREA reports by facility, annual statistical comparison from 2014 - 2017, continuous prevention measures taken from 2014 - 2017 and scheduled staffing and electronic monitoring updates.</p>

115.89	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Policy 14.15 mandates Retention of data and records of any claims associated with any sexual offense, sexual assault, including but not limited to rape, and sexual misconduct will be securely maintained with the PREA Coordinator per Departmental Policy. Interview with PREA Coordinator indicates he is responsible for retention and security of data related to aggregated data collection.</p> <p>Policy 14.15 mandates the Department's PREA Data Report shall be made readily available to the public through the Department's website or through other means as necessary. Annual Report 2015-2016 is available on Agency Website.</p> <p>Policy 14.15 mandates Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers. Review of Annual Report 2015-2016 verifies no personal identifiers involved in the report. On 12/6/17, auditor reviewed the agency website and found the Annual Report for 2016 - 2017 was available. The report identifies inmate reporting and education, annual statistics and definitions, PREA reports by facility, annual statistical comparison from 2014 - 2017, continuous prevention measures taken from 2014 - 2017 and scheduled staffing and electronic monitoring updates. Review of 2015, 2016 and 2017 Annual Report verifies compliance with the Standard.</p>

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<p data-bbox="252 168 901 201"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 246 526 280"><b>Auditor Discussion</b></p> <p data-bbox="252 324 1476 571">Agency has conducted a PREA Audit during the first cycle beginning 2013 and ending 2016. The initial PREA Audit for Santa Clara County Jail was conducted at the Elmwood Women's Facility in 2014, Men' Main Jail Facility was conducted in 2015 and Elmwood Men's Facility was conducted in 2016. All 3 facilities were determined by a PREA Auditor to comply with all PREA Standards. The Elmwood Women's facility PREA Audit is Audited now for the beginning of the 2nd PREA Auditing cycle.</p> <p data-bbox="252 616 1460 907">Agency has conducted a PREA Audit during the first cycle beginning 2013 and ending 2016. Elmwood Women's Facility audit was conducted in 2013, Men' s Main Jail Facility was conducted in 2014 and Elmwood Men's Facility was conducted in 2016. All 3 facilities were determined by a PREA Auditor to comply with all PREA Standards. The auditor was provided access to, and observed all areas of the audited facilities. During the PREA On-site Audit for the Elmwood Women's Facility in 2017, Auditor was provided access to and provided the ability to observe all areas of the audited facility.</p> <p data-bbox="252 918 1476 1041">During the PREA Audit for the Elmwood Women's Facility in 2017, Auditor requested and was provided any and all documentation requested during the Pre-Audit process to make a determination and conclusion with regards to compliance of all PREA Standards.</p> <p data-bbox="252 1052 1444 1131">During the PREA Audit for the Elmwood Women's Facility in 2017, Auditor was permitted to conduct interviews with inmates and staff in a private setting.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<p data-bbox="252 1332 901 1366"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="252 1411 526 1444"><b>Auditor Discussion</b></p> <p data-bbox="252 1489 1476 1780">Agency has conducted a PREA Audit during the first cycle beginning 2013 and ending 2016. Elmwood Women's Facility audit was conducted in 2014, Men' Main Jail Facility was conducted in 2015 and Elmwood Men's Facility was conducted in 2016. All 3 facilities were determined by a PREA Auditor to comply with all PREA Standards. At the end of every PREA Audit, Auditor verified each PREA Annual Report for the year PREA Audit was being conducted, was available on the Agency website. Review of Agency website verify each PREA Annual Report is available on the Agency website for public access.</p>

## Appendix: Provision Findings

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

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

115.11 (c)	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.17 (a)	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who 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)	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.34 (b)	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and 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)	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

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

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

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	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)	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations 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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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.? (N/A before August 20, 2016.)	yes

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited?	yes

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

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

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

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

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)	yes