

PREA Facility Audit Report: Final

Name of Facility: Montgomery County Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/23/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Lori M. Fadorick	Date of Signature: 10/23/2024

AUDITOR INFORMATION	
Auditor name:	Fadorick, Lori
Email:	lfadorick@gmail.com
Start Date of On-Site Audit:	09/09/2024
End Date of On-Site Audit:	09/10/2024

FACILITY INFORMATION	
Facility name:	Montgomery County Jail
Facility physical address:	16 South Franklin Street, Christiansburg, Virginia - 24073
Facility mailing address:	

Primary Contact

Name:	Michael J. Cochran
Email Address:	cochranmj@vamcso.org
Telephone Number:	540-382-6915

Warden/Jail Administrator/Sheriff/Director	
Name:	Captain Michael J. Cochran
Email Address:	cochranmj@vamcso.org
Telephone Number:	540-382-6915

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Southern Health Partners
Email Address:	7474shpjailmedical.com
Telephone Number:	423-553-5635

Facility Characteristics	
Designed facility capacity:	115
Current population of facility:	76
Average daily population for the past 12 months:	72
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males

Age range of population:	Various adult ages
Facility security levels/inmate custody levels:	A-Minimum (Trustee) B- Medium C- Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	28
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	10

AGENCY INFORMATION	
Name of agency:	Montgomery County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	1 East Main Street, Christiansburg, Virginia - 24073
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Michael Shelor	Email Address:	shelorml@vamcso.org

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:

0

Number of standards met:

45

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-09-09
2. End date of the onsite portion of the audit:	2024-09-10

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Women's Resource Center Radford VA

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	115
15. Average daily population for the past 12 months:	72
16. Number of inmate/resident/detainee housing units:	10
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	41
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

<p>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>N/A</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>28</p>

50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	10
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	2
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	N/A

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None

55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Randomly selected at least one offender from each housing area based upon the above factors.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	None
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees.</p> <p><input type="checkbox"/> The inmates/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>

<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>None</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input type="checkbox"/> Shift assignment</p> <p><input type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>None</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>8</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	None

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

The Montgomery County Jail is a 20,502 square foot, three floor, adult local detention facility serving the County of Montgomery, the Towns of Blacksburg and Christiansburg and the campus of Virginia Tech. The facility has a rated capacity of 60 inmates but generally houses around 80 adult male inmates. The facility was constructed in 1953 and was rated at 40 inmates. Additional construction was completed between 1987 and 1989 at a cost of 1.5 million dollars. After completion of the construction, the State of Virginia rating increased to 60. The facility provides an indirect linear observation model of inmate supervision. The facility has two open dormitories, eight multiple occupancy (10 person) cell blocks, and 6 individual cells that are designated as classification holding, or special management/restrictive housing. There are also two holding cells in the docket area. The jail, as it is currently configured, holds minimum and medium security special management, minimum security general population, and medium security general population male inmates. Maximum security inmates are usually designated to a larger regional correctional facility. Female inmates are held for short periods of time for pre-trial detention (one day), while awaiting transfer to a larger regional correctional facility for long term pre- and post-trial detention, or they are held for short non-consecutive terms of confinement, such as weekends (generally no more than two days). In the case where female inmates are detained in the jail, they are searched and supervised by female correctional deputies. The jail provides programming to inmates outside of their housing units in a common area supervised by both deputies, as well as recording CCTV devices.

Food services is provided in-house by kitchen staff (cooks), who are civilian. Inmates do not assist with the food preparation or work in the kitchen with the exception of collecting trash and minimal cleaning. Inmates are fed inside their respective housing areas. Recreation

occurs in a common area and in a specified outside recreation area under the supervision of detention staff as well as recording CCTV devices. There are inmate work programs such as laundry services, maintenance, and housekeeping for approved inmates. The working conditions consist of detention deputy supervision and monitoring by recording CCTV devices. Inmates in work programs are supervised by detention deputies of the same gender and pat searches are conducted by officers of the same gender. There are private areas provided for conducting strip searches. The auditor conducted a thorough inspection of the physical plant and observed that there is an adequate number of recording CCTV cameras in place throughout the facility. Their presence provided safety and security while still allowing for adequate privacy for inmates to perform bodily functions and change clothes. While there are no cameras in the two open dorms, deputies make regular, frequent and irregular rounds through the housing areas to prevent, detect and respond to any potential sexual safety issues. The auditor verified this through staff and inmate interviews and logs.

The elevators are controlled by keys, which only sworn staff have access to and monitor. There are call boxes for the gates in the facility that are monitored and controlled by Central Control. The shower areas were appropriately private, but not so secluded as to create an area for potential abuse. All showers were single unit and would allow an inmate the opportunity to shower in private. The special purpose housing cells had external window coverings that allowed staff to observe inmates as the necessary intervals, but allowed the inmates to maintain their dignity while performing bodily functions or changing clothing. The lighting around the facility was bright and there were no obvious blind spots. There was a cooperative atmosphere between staff and inmates and there appeared to be an attitude of mutual

respect. There were very few areas where staff and inmates would be isolated and in those areas, there was recorded CCTV coverage. Overall, despite the older design elements of the jail, the administration has taken steps to assure that the sexual safety of both staff and inmates is a priority.

3rd Floor - The top floor of the facility houses the Recreation and Program areas.

Laundry - The Laundry area is staffed by 1 male trustee inmate. The program deputy makes rounds and the area is monitored by 1 camera. There is a closet, which stays locked and there are no blind spots in the laundry area. The Auditor spoke informally with the laundry trustee present at the time of the on-site tour.

Program/Recreation Area - The Program/Recreation Area is a large open room with no visible blind spots and this area is used for programs, as well as indoor recreation. This area is monitored by 1 camera, which is a moving camera. In addition, the Program Deputy makes rounds in the area when there are inmates present. His office is adjacent to this room. Classes such as AA, Special Education and others are held in this area. Bible study and religious services is accomplished by the minister walking around to each cell block and spending time speaking with the inmates. The Program area is interchangeable depending on the population and the needs of the facility. The indoor gym is in this area and there is a variety of equipment for the inmates to use. The Program Deputy also holds PREA orientation in this area.

Library - The library is monitored by one camera, as well as by rounds from the Program Deputy when inmates are present. Inmates except those in disciplinary detention are able to come to the library and check out materials to take back to their housing areas. The library schedule is set by the Program Deputy.

Outdoor Recreation - The outdoor recreation area is monitored by one camera which is a

pan- tilt-zoom (PTZ) and enables full coverage of the recreation area.

2nd Floor - The 2nd floor houses minimum and medium custody male offenders. PREA informational posters were observed on the bulletin board in the entryway. Each housing area contains 5 cells with 2 beds each, for a total of 10 beds. There are 4 housing areas - E, F, G and H. There are two housing blocks on each hallway, connected by a smaller hallway, making a U type shape to the area. There are 5 total cameras monitoring the area. Each block contains 2 phones, and 1 shower. There are also 6 toilets, 1 in each cell and 1 in the dayroom area. Announcements of opposite gender staff entering were made. Two of the special purpose cells are also in this area - 01 and 02. One is double bunked and one is single. The other four special purpose cells (201-204) are located on the second floor and are used for female weekenders when they are housed in the jail. Cell 201 has a shower within the cell.

Dorm 1 - Dorm 1 is on the second floor and contains 14 beds and houses minimum custody male offenders. There are 2 showers, 2 toilets and 2 urinals in the dorm. There are no cameras inside the housing area. As with the other dorm, according to jail staff, this is due to the inability of being able to safely and properly install a camera due to the ceiling design.

Deputies make regular, frequent and irregular rounds through the housing areas to prevent, detect and respond to any potential sexual safety issues. Posted PREA informational posters were observed.

Dorm 2 - Dorm 2 is on the second floor and contains 14 beds and houses minimum custody male offenders. There are 2 showers, 2 toilets and 2 urinals in the dorm. There is a camera pointed toward the door on the outside, however, there are no cameras inside the housing area. According to jail staff, this is due to the inability of being able to safely and properly install a camera due to the ceiling design. Deputies make regular, frequent and

irregular rounds through the housing areas to prevent, detect and respond to any potential sexual safety issues. Posted PREA informational posters were observed.

Kitchen - The Kitchen is staffed by kitchen staff (cooks), who are civilian. The Auditor was informed that there are no trustees that work in the kitchen. Inmates do not assist with the food preparation or do any work in the kitchen with the exception of collecting trash and minimal cleaning. There is one camera monitoring the kitchen, which also covers the back stock room area as well. The Auditor observed no blind spots in the kitchen. There is an additional camera outside the kitchen, which monitors the door and parking lot.

Medical - There is one private exam room. There are no cameras inside the medical area, as this is a private exam room area, however there is a camera outside the door so that staff can monitor who is coming and going from the medical area. Medical services are provided by Southern Health Partners. Medical staff is available on-site Monday through Friday 7:00 a.m. until 11:00 p.m., weekends 7 a.m. to 7:30 p.m. and is on-call twenty-four hours a day, seven days a week, as is a doctor for emergent medical needs.

1st Floor - The 1st floor houses minimum and medium custody male offenders. PREA informational posters were observed on the bulletin board in the entryway. Each housing area contains 5 cells with 2 beds each, for a total of 10 beds. There are 4 housing areas - A, B, C and D. There are two housing blocks on each hallway, connected by a smaller hallway, making a U type shape to the area. There are 8 total cameras monitoring the area. Each block contains 2 phones, and 1 shower. There are also 6 toilets, 1 in each cell and 1 in the dayroom area. Housing Unit A currently houses pre-classification inmates. There are 2 cameras monitoring this area. Housing Unit B currently houses weekenders and court inmates. There is one camera monitoring this area. Housing Unit C currently

houses general population overflow inmates. There are 2 cameras monitoring this area. Housing Unit D currently houses protective custody inmates. There are 2 cameras monitoring this area.

Docket - This area has 2 single bunk holding cells. The cameras are pointed at the wall so that there is privacy in the bathroom area. The Auditor observed PREA reporting information and informational brochures posted. However, the auditor suggested more prominent placement

Control - This area monitors 66 cameras. All the cameras record a minimum of 30 days, some more depending on activity. A deputy works this post at all times.

Overall, the Jail was sanitary and orderly. The atmosphere was relaxed and without tension or frustration on behalf of the staff or inmates. The interactions between the staff and inmates were generally positive and mutually respectful. The administration and staff members were friendly, helpful and highly professional.

In the past 12 months, the Montgomery County Jail reported no allegations of sexual assault, harassment or abuse by offenders at the facility. On site, the Auditor confirmed with the administration and PREA Coordinator that there had been no additional allegations since the submission of the PAQ.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

- Yes
- No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Auditor conducted a document review of employee and inmate files, and a spot check of documents that were previously provided to the auditors along with the PAQ. The Auditor reviewed a random sampling of personnel files to determine compliance related to standards on hiring and promotion and background check procedures for deputies and contract staff.

The Auditor reviewed a random sampling of staff training files to determine compliance with training standards. The training staff explained the process for relaying the mandated PREA information to new hires, as well as the procedure for annual refresher training. Random offender case files were reviewed to evaluate intake procedures, including screening and subsequent housing decisions, and verify offender PREA education. In addition, the intake and booking procedures were observed and intake screenings are conducted in private.

Employee Files: The Auditor reviewed a random sampling of personnel files to determine compliance related to standards on hiring and promotion and background check procedures for deputies. The Montgomery County Jail uses Southern Health Partners for medical services, which is the only contractor that they employ.

Inmate Files: The Auditor selected inmate classification files without regard or notice of housing type, housing location, conviction status or time of incarceration. Inmate files were kept in a central location inside locked cabinets and behind a locked door. Random offender case files were reviewed to evaluate intake procedures, including screening and subsequent housing decisions, and verify offender PREA education. In addition, the intake and booking procedures were observed and intake screenings are conducted in private. There are a limited number of staff, including selected supervisors, and jail administration that have access to the records. In addition, all medical records are maintained electronically, and paper files are

maintained in the medical office where only medical personnel and jail administration have access.

Training Rosters: The auditor reviewed the annual PREA training rosters maintained by the PREA Coordinator and cross referenced the staff files with the training rosters to ensure training was verified.

Investigative Files: The Auditor did not review investigative files as there had not been any allegations of PREA related misconduct during the previous 12 months.

The Auditor verified the availability of SANE/SAFE services at both Carilion and Lewis Gale Medical Emergency Departments with the Medical staff at the facility and confirmed with the hospitals.

The Auditor verified the MOU and services available through the Women's Resource Center.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
a. Explain why you were unable to review any sexual abuse investigation files:	No allegations during this review period.

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files) </p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) </p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p> <input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files) </p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>a. Explain why you were unable to review any sexual harassment investigation files:</p>	<p>No allegations during this review period.</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>Staff-on-inmate sexual harassment investigation files</p>	
<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>0</p>
<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>None</p>

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
 No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- Yes
 No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

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

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<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>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. MCSO Organizational Chart 4. Interviews with Staff including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Facility Administrator 5. Interviews with Inmates 6. Observations during on-site review <p>Findings:</p> <p>The Auditor reviewed the Montgomery County Sheriff’s Office Policy. The MCSO has a comprehensive PREA policy which clearly mandates a zero-tolerance policy on all forms of sexual abuse and harassment. The language in the policy provides definitions of prohibited behaviors in accordance with the standard and includes</p>

notice of sanctions for those who have been found to have participated in prohibited behaviors. The definitions contained in the policy are consistent and in compliance with PREA definitions. The policy details the facility’s overall approach to preventing, detecting and responding to sexual abuse and harassment. The zero-tolerance mandate appears to be taken seriously by the staff at the facility and this is reflected in the offender interviews.

The MCSO has designated the Programs Officer as the PREA Coordinator. This position reports to the Jail Lieutenant. A review of the organizational chart reflects this position in organizational structure. The auditor communicated frequently with him during the pre-audit phase of the review and he was incredibly responsive and ensured that all requested documentation was provided in a timely manner. He appears diligent in his duties, and has taken the initiative to reach out to the auditor to ask questions and seek assistance when needed.

The PREA Coordinator reports that he has sufficient time and by virtue of his position, the authority to develop, implement and oversee the facility’s efforts to comply with PREA standards. He and the agency command staff work closely to ensure the facility’s compliance efforts and the sexual safety of the offenders. There appears to be an open line of communication between all levels of staff at the facility. The PREA Coordinator stated he is involved in the implementation efforts, as well as handling and reviewing individual offender issues.

Interviews with inmates indicated that they felt safe in the facility and feel that the staff take sexual assault and sexual harassment seriously. The majority of the inmates felt comfortable reporting to any of the staff at the facility and were confident any allegation would be handled appropriately and promptly.

Interviews with staff indicated that they were trained in and understood the zero-tolerance policy established by the MCSO. They understand their role with regard to prevention, detection and response procedures.

The MCSO has only one facility, and therefore is not required to designate a PREA Compliance Manager.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Service Agreement 4. Interviews with Staff including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Facility Administrator <p>Findings:</p> <p>The Montgomery County Sheriff's Office has a service level agreement with the Western Virginia Regional Jail to house both pretrial detainees, locally sentenced inmates and those inmates awaiting transfer to the Department of Corrections for long-term housing. This agreement was established in 2008. There has not been an updated agreement, however, the Western Virginia Regional Jail is certified PREA compliant. In accordance with the standard, the Western Virginia Regional Jail is in compliance with the PREA standards, and it is the policy of the Montgomery County Sheriff's Office not to house or contract to house inmates in facilities unless they comply with the PREA standards. Based upon the Auditor's review of the MCSO PAQ and the applicable policies, the MCSO does not contract with any other agency to house their inmates; and thus, are in compliance with the standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Staffing Plan Report Dated and Approved August 5, 2024 4. Supervisory Walk-thru Inspection Reports 5. Interviews with Staff 6. Interviews with Inmates 7. Observations during on-site review <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator (Captain)

- Random Staff
- Supervisors Responsible for Conducting Unannounced Rounds

Observation of the following:

- Observation of unannounced rounds by supervisors as well as auditors during the site review
- Observation of supervisors documenting rounds in the daily logbooks on the duty post during the site review

Findings:

The MCSO has a staffing plan that addresses all required elements of the standard. The staffing plan addresses staffing in each area, staffing ratios, programming, facility layout, composition of the inmate population, video monitoring and other relevant factors. During the pre-audit phase, the auditor identified that the staffing plan had not been reviewed and/or updated for 2024. The most recent review of the staffing analysis was completed on August 4, 2024 and provided to the Auditor on August 5, 2024. The facility staffing is based upon the formula dictated by the Virginia Compensation Board to determine the number of staff needed for essential positions. The formula is based upon the number of beds the facility is rated for and provides one deputy position for every three inmates housed. The staffing plan provides for administrative, civilian and sworn staff in all areas of the jail, and on all shifts.

According to the MCSO staffing plan, the Jail shall be manned by a minimum of four staff members at any time. This is the minimum requirement in order to properly provide for the safety and security of both the inmates and staff within the facility. If there are any deviations from the Jail Staffing plan that allows for an inadequacy in the safety, security and monitoring of the facility, the shift supervisor and/or Jail Lieutenant are able to issue a "call out for coverage" to the staff that are scheduled to be off so that someone will fill that void. This shall provide coverage so that the staffing plan remains in compliance. Each shift is designed to contain a Lieutenant, a Sergeant, and two deputies. These positions are the primary essential staff for 24-hour operation. There are four rotating shifts that have four positions on each shift, with each shift having its own supervisor. These shifts work 0600 to 1800, or 1800 to 0600, and rotate daylight to nightshift every two weeks. Along with the rotating shifts, the Jail has fifteen daylight positions that typically work Monday through Friday, 0800 to 1700. These positions (Chief of Corrections (Captain), Assistant Chief of Corrections (Lieutenant), 1 Medical Sergeant, 1 Medical Deputy, 2 Home Electronic Monitoring deputies, 1 Control Room operator, 1 Maintenance Deputy, 1 Classification Deputy, 1 Records Deputy, 1 Lids Technician Deputy, 2 Transportation Deputies, 1 Programs Director/PREA coordinator) assist in the daily functions of the facility.

The staffing plan does require any deviations be documented and justified. Notations and daily deviations from the regular staffing plan are notated on the shift roster by the shift supervisor. The shift supervisor ensures that staffing does not fall below the minimum required. According to the PAQ and verified through staff interviews, there have been no instances of non-compliance with the staffing plan.

The auditor reviewed the facility's current staffing plan as well as the most recent staffing plan review. In that review, they have documented that they have considered all of the elements from standard 115.13 (a) (1-15) as part of the review. In addition, the review was approved by the Jail Administrator. During interviews with the PREA Coordinator and the Jail Administrator, the auditor verified that he reviews and approves the annual staffing plan. In addition, the Jail Administrator does consider the use of CCTV. The Jail Administrator told the auditor during the targeted interview that if there were an instance where the facility did not comply with their staffing plan, that instance would be reported and it would be reviewed. However, according to the PREA Coordinator, the Jail Administrator, and the PAQ there were no instances where they were out of compliance with the staffing plan. During the on-site portion of the audit and review of the on-duty personnel, the auditor found them to be following the staffing plan.

The auditor reviewed the most recent annual review, and the jail's review was in compliance with the elements of 115.13(a). In addition, during the on-site review, the auditor reviewed the deployment of CCTV monitoring. The facility has a camera surveillance system comprised of multiple monitors located in the control room. These screens are monitored by staff at all times. The most recent review of the staffing plan indicated the video monitoring system and placement of cameras were reviewed.

The staffing plan appears satisfactory in the agency's efforts to provide protection against sexual abuse and harassment. The Auditor observed cameras in all areas of the facility. There appeared to be open communication between staff and inmates. Inmates seemed to comfortable approaching staff with questions and Auditor observed formal and informal interactions between staff and inmates.

In the PAQ, the agency reports that they conduct unannounced rounds on all shifts. A review of the MCSO policies indicated that policy requires that supervisors will conduct and document unannounced rounds each shift, and that there is a prohibition against staff altering other staff of the rounds. During the pre-audit phase, the jail provided the auditor a sample of log books with record of unannounced rounds. This documentation sampling verified that unannounced rounds were conducted during all shifts. During the on-site portion of the audit, the auditor reviewed logbooks that verified that unannounced rounds were recorded on the officer's duty posts. The Auditor reviewed log books indicating rounds made. It is clear through observation that supervisors and administrators are conducting unannounced rounds and that the offenders are comfortable approaching and speaking with them. Interviews with shift supervisors, facility administrators, as well as line staff and inmates indicate that the rounds are unannounced and random and that there's no way for the staff to alert each other when the supervisors are coming through because there is no pattern or routine to the rounds. In addition, the supervisors on the shifts are working supervisors, so they are on the duty posts frequently during their shifts.

After a review, the Auditor determined that the facility meet all the minimal requirements of the standard. The auditor reminded the facility that a review of the staffing analysis is required on an annual basis.

	Corrective Action: None
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Review of population report on the day of the audit as well as population reports from the previous 12 months <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator <p>Findings:</p> <p>The MCSO policy is written in compliance with the standard and has procedures in place if they were to receive an adjudicated offender under 18. This does not occur often and in fact, none of the staff interviewed could recall the last time they had received or held a youthful offender. The PAQ, documentation submitted and interviews with staff confirm that there have been no youthful offenders housed at the MCSO within the audit period. According to the documentation submitted with the PAQ, as well as personal interviews with the PREA Coordinator, and informal discussions with staff, youthful offenders are not routinely housed at the MCSO. However, the staff are aware of the procedures to follow if this were to occur.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Lesson Plan for Searches 4. Shift schedules & rosters indicating availability of staff

5. Interviews with Staff

6. Interviews with Inmates

Interviews with the following:

- PREA Coordinator
- Random Staff
- Random Inmates

Observation of the following:

- Observation of inmate housing area with individual showers with modesty curtains
- Observation of CCTV coverage of housing areas and individual protective cells
- Observation of staff announcing the presence of opposite gender staff during site review

Findings:

The MCSO does not conduct cross-gender strip searches or cross-gender visual body cavity searches except when performed by medical practitioners. There is no exigent circumstance exception in the policy. Interviews with staff indicate operational practice is consistent with this policy. The facility reports in the PAQ and verified through staff interviews that no cross-gender strip searches or visual body cavity exams have occurred.

MCSO policy prohibits the pat down search of female inmates by male staff members absent exigent circumstances and any such search shall be documented. The facility holds primarily male offenders. There is not a prohibition against female deputies patting down male offenders, however, this does not routinely occur. Female inmates are held for short periods of time for pre-trial detention (one day), or while awaiting transfer to a larger regional correctional facility for long term pre- and post-trial detention.

The facility has no designated female housing areas and if received, are only held for a short period of time before being sent to the Regional Jail. There is usually at least one female officer assigned and on duty for each shift. In the case where female inmates are detained in the jail, they are searched and supervised by female correctional deputies. During the regular, daytime hours, there are also daylight female deputies and supervisory staff available if needed. During the evening and nighttime hours, female patrol officers could be utilized if need be, for searching. Female offenders' access to programming and out of cell opportunities are not limited due to a lack of female staff. Interviews with staff and offenders confirm that cross-gender pat down searches of female inmates do not occur.

During the on-site portion of the audit, logs maintained verified that during the audit period, there were no instances where female inmates were pat searched by male staff.

MCSO policy states that inmates are able to shower, change clothes and perform bodily functions without nonmedical staff of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent circumstances or incidental to routine cell checks. The policy states that staff of the opposite gender shall announce their

presence when entering an inmate housing unit. Female deputies regularly supervise the male housing units. Informal and formal random inmate interviews indicated that there is not an issue with them being able to change clothes, shower or perform bodily functions without the female deputies seeing them and that there is a mutually respectful relationship between the staff and offenders. Most offenders indicated that announcements are being made when opposite gender staff enter the housing units. Staff interviews also indicate the offenders' privacy from being viewed by opposite gender staff is protected. Shower curtains and partitions afford offenders appropriate privacy while still affording staff the ability to appropriately monitor safety and security. Cameras are placed appropriately so that shower and toilet areas are not in view. There are no cameras inside the dormitory housing areas, which the Auditor made note of, however staff make regular, varied rounds in the area to prevent, deter and detect sexual abuse and harassment. Due to the structure and material of the ceiling, staff explained that it would be cost prohibitive to install cameras in the area.

The policy states that staff of the opposite gender shall announce their presence when entering an inmate housing unit. Informal and formal random inmate interviews indicated that there is not an issue with them being able to change clothes, shower or perform bodily functions without the female deputies seeing them and that there is a mutually respectful relationship between the staff and offenders.

Offender and staff interviews indicated that announcements are not routinely being made when opposite gender staff enter the housing units. However, despite the inmates reporting that announcements were not being made, all of the inmates interviewed stated they usually know when a female deputy is working and enters the housing unit. Staff interviews also indicate the offenders' privacy from being viewed by opposite gender staff is protected. Shower curtains and partitions afford offenders appropriate privacy while still affording staff the ability to appropriately monitor safety and security. Cameras are placed appropriately so that shower and toilet areas are not in view. The Auditor discussed with the PREA Coordinator a reminder to the staff to ensure that announcements are being made by female deputies when entering the housing areas.

MCSO policy prohibits searching or physically examining a transgender or intersex offender for the sole purpose of determining the offender's genital status. According to random and targeted and review of logs during the on-site portion of the audit, no inmate has been examined for the purpose of determining gender status. During staff interviews, when asked what they would do if they were unable determine an offender's gender or genital status, all the staff were very clear in their understanding and were able to articulate that they could determine this information other ways, including asking the offender. The MCSO had no transgender or intersex inmates during the past 12 months or during the on-site portion of the audit, therefore none were interviewed.

During the pre-audit portion of the audit, the auditor reviewed the training presentation that is provided to all employees regarding how to conduct cross-gender pat down searches as well as how to properly search transgendered and intersex inmates in accordance with this standard. According to the PAQ, 100% of all

	<p>employees hired in the last 12 months received the required training. The PREA Coordinator also provided a sample of training verification files, which the auditor could match to the training roster provided. During the on-site document review of employee files, the auditors verified the documents in the employee files provided during the pre-audit phase. MCSO policies require all deputies to be trained on how to conduct searches, including those of transgender and intersex offenders. Staff indicated that they are trained to do cross-gender searches at the academy and were generally able to articulate to the Auditor how they would accomplish a search of a transgender inmate. The Auditor reviewed the training outline, as well as reviewed random training files. During the random staff interviews, all employees interviewed recalled being provided training on how to perform cross-gender pat down searches as well as how to search transgendered or intersex inmates. While interviews indicate that the deputies have a basic understanding of how to conduct cross-gender searches and searches of transgender and intersex offenders, the staff could benefit from refresher training in this area.</p> <p>Inmate interviews indicate that most of the time, female announcements are being made, but not always consistently.</p> <p>After a review, the Auditor determined the facility meets the minimal requirements of the standard.</p> <p>Corrective Action: None</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Forms and pamphlets in English and Spanish 4. Statement indicating no inmates requiring accommodations 5. Review of PREA training curriculum with section on effective communications 6. Employee training rosters for the past 12 months 7. PREA Training Video in English and Spanish and with subtitles 8. Interviews with Staff 9. Interviews with Inmates <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator

- Agency Administrator
- Random Staff
- Intake Staff

Observation of the following:

- Observation of inmate information in Spanish

Findings:

The MCSO takes appropriate steps to ensure that offenders with disabilities, including those who are deaf, blind or have intellectual limitations have an equal opportunity to participate and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment. MCSO policy is written in accordance with the standard and indicates that during booking, offenders determined to have disabilities will have accommodations made to ensure that materials are received in a format or through a method that ensures effective communication. A statement from the PREA Coordinator indicates that the MCSO has not received any offenders with disabilities that required any special accommodations in the past year. The PREA Coordinator indicated that if the Sheriff's Office were to receive an offender with a disability that required any accommodations to ensure they were able to fully participate and benefit from all aspects of the facility's efforts to prevent and/or respond to sexual abuse and harassment, the Jail Lieutenant would make all necessary accommodations and notification to the other staff. If they cannot meet the inmate's needs, they have the option of transferring the inmate to the Regional Jail.

Interviews with staff, including supervisory staff and deputies confirm that they have a process in place to ensure that all inmates, regardless of disability would have equal access to PREA information. Staff, including the Facility Administrator, the PREA Coordinator, and various deputies during random and informal interviews indicated that they did not currently have any offenders with disabilities or special needs that would require accommodations to have access to the PREA information and protections.

The Auditor observed PREA informational posters throughout the facility in both English and Spanish. Spanish is the prevalent non-English language in the area. During both formal and informal interviews with staff responsible for intake and classification, when asked how they ensured that inmates with disabilities were provided access to the PREA program, staff indicated that they have options on a case-by-case basis. When asked how they would respond to the needs of an individual with a cognitive disorder or severe mental illness, staff told the auditor that it would depend on the level of impairment and the specific communication needs of the prisoner. Most offenders with any type of disability or special need would be transferred to the Regional Jail.

MCSO policy indicates that offenders who are limited English proficient have access all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and harassment, including providing interpreters. The Auditor determined through staff

	<p>interviews that the MCSO has interpreters available for limited English proficient offenders through the use of the handheld trackers that they use for completing rounds. Just about every staff member interviewed mentioned this as an option.</p> <p>No inmates with disabilities or with limited English proficient were identified by the facility. It should be noted that the auditors did not come into contact with any prisoners who did not speak English during the site review. According to the submitted PAQ, the agency used an interpretive service zero times during the last 12 months. The MCSO staff reviewed the records of all inmates to ensure there were no inmates identified as having a disability or limited English proficient.</p> <p>The MCSO policy prohibits the use of inmate interpreters except in instances where a significant delay could compromise the offender’s safety. Interviews with staff indicate that offenders are not and would not be used as interpreters. During the random staff interviews, no staff member said it was appropriate to use an inmate interpreter when responding to allegations of offender sexual abuse. According to the targeted interview with the PREA Coordinator, there were no instances of the use of an inmate interpreter even in exigent circumstances.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.17	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. MCSO Hiring Background Packet 4. Review of recently promoted employee files from the past 12 months 5. Reviews of randomly selected employee files 6. Review of randomly selected volunteer files 7. Background Information on Contract Employees hired within the last 12 months 8. Background Information on Medical Employees 9. Interviews with PREA Coordinator and Jail Administrator <p>Findings:</p> <p>The MCSO does not hire any sworn staff that has engaged in sexual abuse or harassment as stipulated in the standard. The language in the policy is written consistently with that in the standard. The Auditor reviewed the background packet</p>

used by the MCSO and found that they are asking these questions during the interview process to determine if they are hiring anyone who has engaged in prohibited conduct. Interviews with staff confirm that they are asking these questions during the interview process for applicants for sworn positions. Staff indicated that the background investigator thoroughly vets any prospective employee and asks directly about previous misconduct as required by the standard. The document review on-site and the interviews with the PREA Coordinator and Jail Administrator confirmed that they have complied with this policy and no employee with such a history has been hired during the audit period.

The policy indicates that the MCSO will consider any instances of sexual harassment in determining whether to hire or promote anyone, or enlist the services of contractors who may have contact with inmates. During targeted interviews, staff stated that instances of sexual harassment would definitely be a factor when making decisions about hiring and promotion. Every employee and contractor undergo a background check and is not offered employment if there is disqualifying information discovered.

There is a written policy that requires inquiry into a promotional candidate's history of sexual abuse or harassment. Documentation reviewed supports compliance with the standard in accordance with facility policy. During the on-site portion of the audit, the Auditor reviewed files of employees that were hired in the last 12 months. All of the employees' files contained background checks and pre-employment questionnaires where employees were asked the questions regarding past conduct and their answers were verified by a background investigation.

The auditor also asked about the process for employees that are promoted. The MCSO uses a disclosure/acknowledgement form that asks the required questions of applicants to determine prior prohibited conduct. The Auditor reminded the facility that these forms must be completed for all applicants during the promotional process.

MCSO policy requires inquiry into the background of potential contract employees regarding previous incidents of sexual assault or harassment. The MCSO uses contract medical services. Consistent with MCSO policy, all employees and contractors must have a criminal background records check prior to employment. Staff at the MCSO complete criminal background checks for all prospective applicants and contractors, prior to being offered employment. Staff verified this information in interviews discussing the background process.

Staff stated that if a prospective applicant previously worked at another correctional institutional, they make every effort to contact the facility for information on the employee's work history and any potential issues, including allegations of sexual assault or harassment, including resignation during a pending investigation. Staff stated that most of the surrounding agencies were good about sharing information with each other. The auditor verified that background checks had been completed on the contract medical staff.

The MCSO does not complete background checks every five years, however agency

	<p>policy includes an affirmative requirement that employees have a duty to report any conduct in violation of the PREA standards. The MCSO requires all employees and contract staff to report any contact with law enforcement to their immediate supervisor. The Facility Administrator was clear about the fact that an employee engaging in any type of misconduct such as listed in the standard would not be retained.</p> <p>The MCSO asks applicants for sworn positions, contractors and volunteers directly about misconduct as described in the standard using a Self-Declaration form during the application process. These forms are maintained in their respective personnel file. The Auditor reviewed random files and verified these forms are being completed. Interviews with staff indicated that the forms are being completed as required by the standard and MCSO policy. MCSO policies stipulate a continuing affirmative duty to disclose any PREA related misconduct. All current and new staff are trained on the PREA policy, as well as annual refresher training. Training records verifying that employees acknowledge that they have read and understand the policy.</p> <p>In accordance with the standard, MCSO policy stipulates that material omissions regarding such conduct, or the provision of materially false information shall be grounds for termination. Interviews with staff verified that the MCSO would and has terminated employees for engaging in inappropriate behavior with inmates, upon learning of such misconduct.</p> <p>MCSO policy indicates that the facility shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer and a signed release of information. As noted above, Staff stated that most surrounding agencies would share information out of professional courtesy. Staff indicated they would share information upon request from another facility regarding a former employee.</p> <p>After a review, the Auditor determined the facility minimally meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Memo re cameras 4. Interviews with PREA Coordinator and Jail Administrator

	<p>5. Observation of camera placement and footage</p> <p>Findings:</p> <p>According to the MCSO PAQ and targeted interviews with the PREA Coordinator and Jail Administrator, the MCSO has not made an upgrade to the camera system since their last PREA audit. Interviews with the PREA Coordinator and Jail Administrator indicates that the last upgrade to the camera system and rounds tracking system took place prior to the last audit. The upgrade included both new and updated cameras.</p> <p>A targeted interview with both the PREA Coordinator and the Jail Administrator revealed that in the course of the upgrade, the facility considered how such technology may enhance the agency’s ability to protect inmates from sexual abuse in accordance with the standard. They stated that the system allowed for more angles than they previously had. The system was also higher quality and provided more clarity and a better ability to identify inmates.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Flow Chart 4. Checklist 5. Interview protocol <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>Findings:</p> <p>The MCSO is responsible for both administrative and criminal investigations. The facility follows a uniform protocol for investigating allegations of sexual abuse that maximizes the possibility of collecting usable evidence and trains facility staff who may be first responders in this protocol. The evidence protocol is specified in policy and described and confirmed by the Investigator, who is very experienced and able to fully articulate investigative procedures for a sexual assault in a jail setting.</p>

Interviews with staff indicate that they are trained and familiar with the evidence protocol and what to do if they are the first responder to a sexual assault.

The MCSO can hold youthful offenders if adjudicated as adults. However this rarely, if ever happens. The evidence protocol utilized by the Sheriff's Department is developmentally appropriate for youth and written in accordance with the standards.

MCSO policy stipulates that all victims of sexual abuse shall be offered a forensic medical exam, without financial cost including prophylactic testing/treatment for suspected STIs, and pregnancy testing as applicable. There is an on-call Clinical Forensic Nurse through Carilion New River Valley Medical Center that is notified in such instances. These exams would be performed off-site at the hospital.

Examinations will be conducted by qualified SANE/SAFE experts in accordance with the guidelines of the American Nurses Association as well as the standards of the International Association of Forensic Nurses. In the event the on-call Forensic Nurse is not available, the exam would be performed by SANE/SAFE employees at the hospital. The availability of these services was confirmed by the Auditor with the medical staff. She indicated they always had a SANE/SAFE nurse available 24 hours per day and 7 days per week and there would be no charge to the victim for this exam. The MCSO reported on the PAQ there had been no incidents of sexual abuse and no forensic exams conducted. This was confirmed by jail staff and the medical staff.

Agency policy indicates MCSO will make every attempt to make a victim advocate available. Policy also stipulates that if requested by the victim, the victim advocate, a qualified agency staff member or qualified community-based organization staff member shall accompany the victim through the process. The MCSO has the availability of qualified staff members, mental health providers, who are available and willing to provide this service. During targeted staff interviews, the Auditor verified the availability of this service.

MCSO policy indicates they will make a victim advocate from a rape crisis center available to an abused inmate. A local rape crisis center, Women's Resource Center is available to serve as a victim advocate to victims of sexual assault at the MCSO. The MCSO just recently secured an MOU with the agency. The auditor verified that an advocate would be available to accompany and support the victim through the forensic exam process, if requested and shall provide any needed or requested emotional support or crisis intervention services. There have been no instances of sexual abuse that have required services in the past 12 months. Targeted interview with the PREA Coordinator confirmed that no advocacy services had been utilized during the audit period.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Statement re investigations 4. Website <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Investigative Staff • Random Inmates <p>Findings:</p> <p>The MCSO policy is written in accordance with the standard and requires that an investigation is completed for all allegations of sexual abuse and harassment. Policy also dictates that allegations are referred for a criminal investigation if warranted. The PREA Coordinator, supervisors and Investigators work very closely together to ensure that all allegations of sexual abuse and harassment are investigated promptly and thoroughly. If an offender alleges a sexual assault or sexual harassment has taken place, the staff member will notify the supervisor, who will take the initial report and refer it to the PREA Coordinator and one of the investigators for further action. They coordinates with the Jail supervisors to determine the course of action.</p> <p>A targeted interview with both the investigative staff and the PREA Coordinator verified that all allegations of sexual abuse or harassment are investigated, and both described the process for investigations. Once an allegation is received, it is referred for investigation based upon the type of allegation. In the case of a sexual abuse allegation, the first responders and supervisory personnel would initially take action to separate the alleged victim and perpetrator and takes steps to preserve any evidence. The on-duty supervisor would brief the PREA Coordinator and initiate a call to the department investigators to begin an investigation. Essentially, all reports of sexual abuse or harassment are evaluated by the first responders and supervisors in coordination with the PREA Coordinator, and a determination is made whether to initiate a criminal investigation. If there is no exigency and no evidence that a crime has occurred, the agency initiates an administrative investigation. The incident is investigated and if during the investigation, it is determined that there is evidence to support a crime was committed, the investigators will consult with the Commonwealth Attorney as necessary. If there is no evidence that a crime was committed, then the investigation is completed as an administrative investigation.</p> <p>Interviews with staff indicate they are aware of their responsibility to investigate</p>

	<p>every allegation, refer the allegation if it involves criminal behavior and notify their supervisor of all allegations.</p> <p>Interviews with random inmates indicate that they feel that the staff at the facility take PREA and their sexual safety seriously and that any allegation would be promptly and thoroughly investigated.</p> <p>The MCSO reports there has been no allegations of sexual assault or harassment in the past 12 months.</p> <p>MCSO policy requires that all sexual assault allegations that involve evidence of criminal behavior be referred for criminal prosecution.</p> <p>The auditor reviewed the MCSO website and the agency policy is posted and publicly available. During an interview with investigative staff, they verified that investigations that revealed criminal behavior would be referred to the Commonwealth Attorney for prosecution.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. 2020 Annual Training 4. New Hire PREA Training 5. PREA Lesson Plan 6. Review of Training Files 7. Interviews with Random Staff and PREA Coordinator <p>Findings:</p> <p>The MCSO policy is written in accordance with the standard and includes all required topics and elements of the standard. Policy requires that all employees, contractors, volunteers and civilian staff member who have contact with inmates receive training. According to the policy, mental health and medical personnel receive specialized training. The training is tailored to both male and female inmates. While the facility primarily holds males, females are held for short periods of time. The facility provides</p>

	<p>PREA training annually to each employee to ensure they remain up to date on the MCSO policies and procedures regarding sexual abuse and harassment. Each employee signs to acknowledge they have received and understand the material.</p> <p>The Auditor reviewed the training curriculum and verified it included all information and each element required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all employees are receiving the training. During the pre-audit period the Auditor reviewed a sampling of training documentation with attendance rosters and employee acknowledgements, as well as logs of training attendance. In addition, during the on-site portion of the audit, the auditor verified the training of staff by reviewing staff training rosters for verification of training attendance. Furthermore, the auditor reviewed the entire training logs for all employees who had received training for the current year. New staff are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During interviews with the PREA Coordinator, he confirmed that no employee is permitted to have contact with inmates prior to receiving PREA training during orientation.</p> <p>The Auditor conducted formal and informal interviews with random and specialized staff. All staff interviewed indicated that they had received training and were able to articulate some information from the training. Interviews with staff revealed that they are clear on the zero-tolerance policy and their duties as first responders. While they generally remember the training, they had difficulty recalling some of the more specific information contained in the curriculum. During the staff interviews, all the random employees recalled having annual PREA training. The auditor asked the employees if they recalled being trained on each required element of the PREA training. None of the employee interviewed remembered all elements of the training. Staff appear to understand their responsibilities regarding the standards and all documentation is maintained accordingly.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Annual Training 4. New Contractor PREA Training

5. Review of Training Files

6. Contractor PREA Training Curriculum

Interviews with the following:

- PREA Coordinator
- Contract Staff
- Volunteer Staff

Findings:

The MCSO policy is written in accordance with the standard and includes all required topics and elements of the standard. MCSO policy requires that all volunteers and contractors receive training regarding PREA. This training is required to be completed, in person, prior to contact with any inmates. The training is tailored to both male and female inmates, as the facility holds both. The facility provides PREA training annually to each contract employee and volunteer to ensure they remain up to date on

the MCSO policies and procedures regarding sexual abuse and harassment. The PREA Coordinator briefly reviewed with the Auditor a typical training session.

The Auditor reviewed the training curriculum and verified it included all information required by the standard. The Auditor reviewed the training rosters, as well as random training files to verify and ensure all contracted employees are receiving the training. New contractors and volunteers are given PREA training during their orientation before assuming their duties and sign a verification acknowledging they have received the information. During the document review, the auditor was able to verify that the contractors who had been trained were required to sign an acknowledgement that they had received and understood the PREA training. The auditor reviewed the files of contract employees and verified that the signed training acknowledgement form is retained in their files. In addition, during a targeted interview with the PREA Coordinator, he verified that training acknowledgements were retained in the files.

Per the PAQ, there are 9 volunteers and contractors who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

The Auditor conducted formal interviews with contract staff. During the targeted interviews with contract staff members, each of the interviewees told the auditor that they recalled having the PREA training and knew of the MCSO's zero-tolerance policy against sexual abuse and harassment. When asked what would be the consequence if they violated the PREA policy, they stated they would be removed from the facility. Contract staff appear to understand their responsibilities regarding the standards. The MCSO is providing training in accordance with the standard. The documentation is maintained accordingly.

No volunteers were available at the time of the onsite audit. The auditor was able to conduct a phone interview with one volunteer. The volunteer recalled having had training on the facility's zero tolerance policy and what to do in the event of an allegation.

	<p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Review of inmate training materials 4. Review of inmate training documentation 5. Inmate Handbook 6. Sampling of inmate files comparing intake date, the date of initial screenings, and the date of comprehensive screening 7. Sampling of Completed Orientation/Intake forms from inmate files with inmate signatures 8. Logs of Completion of all inmates provided Comprehensive Education <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Random Inmates • Intake Staff <p>Observations of the Following:</p> <ul style="list-style-type: none"> • PREA informational Posters throughout the facility in inmate housing and common areas • Inmate Intake Process <p>Findings:</p> <p>The MCSO policy is written in accordance with the standard. In accordance with policy, offenders receive a screening and training regarding the facility's zero tolerance policy. This information, along with the inmate handbook and informal posters provides offenders with information regarding sexual abuse and assault, the agency's zero tolerance policy and how to report incidents of sexual abuse or harassment.</p> <p>The comprehensive education is accomplished through the use of the PREA orientation video. This video is available to be watched on the tablet. The Program Deputy verifies and tracks who has reviewed the video and maintains documentation of such. The orientation video is viewed by offenders at the time of their orientation</p>

with the Program Deputy if they have not watched it on the tablet. This typically occurs within 72 hours of admission. The video is shown in the program area and the Program Deputy is available should the offenders have questions regarding the video. The Auditor reviewed random inmate records files to ensure the training was being completed for all inmates. The Program Deputy has a binder for each year where he maintains the PREA education for all inmates.

Interviews with staff and offenders both formally and informally verified that offenders are receiving the initial and comprehensive training.

All current offenders have received PREA training. Offender interviews indicate that the majority remember receiving information upon arrival and viewing the orientation video. They have an awareness of PREA information and how to report.

As required by the standard, policy provides for education in formats accessible to all inmates. There are Spanish versions of all materials. For offenders that are visually impaired, a staff member would read the information to the offender. As indicated in the policy, all other special needs would be handled in coordination with the PREA Coordinator on a case-by-case basis. There have been no instances of the need to accommodate special needs prisoners during this audit period. The MCSO has interpretation services available for inmates with limited English proficiency.

Information in multiple formats was available throughout the facility. The Auditors observed PREA informational posters in offender housing areas. The inmate handbook is available and provided to offenders. Information is also posted at the booking counter.

During a targeted interview with the PREA Coordinator, he reviewed the intake process, including the explanation of the PREA pamphlet given to the inmate. In discussions with staff, deputies told the auditor that they explained the agency's zero tolerance policy regarding sexual abuse and harassment, and they explained to the newly committed inmates that they could report any instances of abuse or harassment to staff. Interviews with staff verified that inmates, including any transferred from another facility, are given the same PREA orientation.

Random inmate interviews revealed that most inmates remembered receiving information about the agency's zero tolerance policy and how to make a report of sexual abuse. The majority of the inmates said that they would just tell the staff or write a note.

The auditor reviewed a sampling of inmate files from the previous year. There was documentation of the initial inmate PREA orientation, signed by the inmate at the time of admission. This verified what the auditor personally observed, what the interviews revealed, what was required by policy and what was reported in the submitted PAQ.

Information in multiple formats was available throughout the facility. The Auditor observed PREA informational posters in all offender housing areas. The inmate handbook is available and provided to all offenders.

	<p>After a review, the Auditor determined that the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ul style="list-style-type: none"> • MCSO Completed PAQ • MCSO PREA Policy • Review Training Curriculum for Specialized Training • Review of Training Certificates for Investigators <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Investigative Staff <p>Findings:</p> <p>MCSO policy is written in accordance with the standard. MCSO investigators conduct both administrative and criminal investigations. There is currently one investigator for MCSO who has had specialized training in conducting sexual assault investigations in confinement settings. The Auditor was provided a copy of the training certificate for the investigator. The training was completed in September 2021 and included all mandated aspects of the standard, including Miranda and Garrity, evidence collection in a correctional setting, as well as the required evidentiary standards for administrative findings.</p> <p>There have been no allegations of sexual harassment or sexual assault in the past year at the Montgomery County Jail. Therefore, there have been no required investigations.</p> <p>During a targeted interview with the designated investigator for the jail, he appeared knowledgeable regarding sexual assault investigations and was able to articulate information from the training. He indicated that, if in the course of the investigation, it appeared that the conduct was criminal in nature and there could be criminal charges involved they would consult with the Commonwealth Attorney regarding any potential charges.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	<p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 338 1082 371">Evidence Relied upon to make Compliance Determination:</p> <ul data-bbox="256 383 1082 499" style="list-style-type: none"> <li data-bbox="256 383 600 416">• MCSO Completed PAQ <li data-bbox="256 421 544 454">• MCSO PREA Policy <li data-bbox="256 459 1082 499">• Review training logs for medical and mental health staff <p data-bbox="256 539 675 573">Interviews with the following:</p> <ul data-bbox="256 577 536 651" style="list-style-type: none"> <li data-bbox="256 577 536 611">• PREA Coordinator <li data-bbox="256 616 472 651">• Medical Staff <p data-bbox="256 692 384 725">Findings:</p> <p data-bbox="256 766 1465 1133">The MCSO policy is written in accordance with the standard to indicate that the medical staff will receive specialized training in accordance with the standard. Medical staff are contract employees through Southern Health Partners. According to the training records and interviews with staff, they have been trained in accordance with the requirements of the standard, including how to respond and how to detect signs and symptoms of sexual abuse. The Auditor reviewed the curriculum and it covered all mandated aspects of the standard. This is a standardized training curriculum through Southern Health Partners that is taken by all staff that work regularly in the jail.</p> <p data-bbox="256 1173 1465 1290">The staff of the MCSO does not perform forensic medical examinations for victims of sexual assault. Forensic medical exams are conducted at Carilion New River Valley Medical Center.</p> <p data-bbox="256 1330 1406 1404">All medical and mental health staff have received training on PREA mandated by MCSO policy and standard 115.32.</p> <p data-bbox="256 1444 1390 1518">Inmates at MCSO that may have medical needs or medical conditions that need monitoring are transferred to the regional jail.</p> <p data-bbox="256 1559 1406 1632">After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p data-bbox="256 1673 595 1706">Corrective Action: None</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. MCSO Completed PAQ
2. MCSO PREA Policy
3. Review of Screenings
4. 30 Day Reassessments and Logs
5. Sampling of Random Inmate Files

Interviews with the following:

- PREA Coordinator
- Random Inmates
- Intake Staff Observations of the Following:
 - Inmate Intake Process

Findings:

According to MCSO Policy all inmates shall be assessed upon their admission to the facility and reassessed no later than 30 days after admission to the facility. The policy is written in accordance with the standard and includes all the required elements. During the site review, the auditor was not able to follow an inmate through the admission and classification process. Interviews with the intake staff (which can be any certified deputy) and classification staff verified that upon admission within 72 hours, all inmates are screened for risk sexual abuse victimization and the potential for predatory behavior.

This was also confirmed by the PREA Coordinator. During interviews with random inmates, most remember being asked PREA related questions during their admission; although none of the inmates remembered all of the PREA risk assessment questions. The Auditor asked the inmates if they were asked the risk screening questions. Most inmates remembered at least something about the risk screening or some of the questions.

The risk screenings are completed by the classification deputy within 72 hours. A targeted interview with staff confirmed this is being done. The screenings are completed using an objective screening instrument. The screenings are reviewed and further action is taken if warranted. Risk levels are also reviewed and reassessed based upon any new information received that would affect the inmate's risk of sexual victimization or abusiveness. Action is taken as required in these instances. Offender interviews indicate that risk assessment screenings are being completed. The auditor reviewed random inmate files and reviewed their booking reports and risk screenings to compare the admission date and the date of admission screening. All randomly selected files had received risk screening within 72 hours of booking. The auditor reviewed the PREA risk assessment instrument and it is objective as required by the standard. The questions are asked and the answers are recorded on the risk assessment form. There are areas on the form that allows for the inclusion of additional details related to the question, if additional data needs to be documented.

Targeted interviews with the PREA Coordinator, and random staff verified that only authorized staff have access to PREA risk assessment screening information, unless

	<p>the inmate is referred for medical or mental health treatment. The screening forms are completed and are accessible only by authorized staff. The auditor reviewed this information and verified it is maintained with limited access.</p> <p>According to the PAQ and MCSO Policy, the PREA screening instrument shall include 10 individual elements as listed in the standard. Upon review of the screening instrument, the auditor determined that the screening instrument did not include all of the required elements. The inmates are being asked about prior victimization as required and referring to mental health as needed.</p> <p>According to MCSO Policy the initial screening shall consider prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse in assessing the risk of inmates being potential abusers. The auditor reviewed the objective screening instrument and verified that the questions are present on the screening instrument and during the inmate file review, the same completed forms were in the inmate files.</p> <p>The auditor reviewed random inmate files to determine if 30-day assessments had been completed. A review of the files revealed that these are being completed as required by the standard.</p> <p>Staff indicated that an inmate’s risk level is reassessed based upon a request, referral or incident of sexual assault. There were no instances of this in the past 12 months. The MCSO only operates one facility, therefore they are not required to reassess upon transfer.</p> <p>MCSO Policy stipulates that no inmate shall be disciplined for refusing to answer or disclose information in response the risk assessment questions. According to a targeted interview with the PREA Coordinator, there have been no instances of inmates being disciplined for refusing to answer screening questions.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ul style="list-style-type: none"> • MCSO Completed PAQ • MCSO PREA Policy

- Review of classification screening decisions for inmates

Interviews with the following:

- PREA Coordinator
- Supervisors Responsible for Conducting Unannounced Rounds

Observation of the following:

- Site review of inmate housing units

Findings:

The MCSO policy requires that screening information from the PREA risk assessment is used in making housing, bed work, education, and programming assignments. Classification deputies complete the risk assessment screenings and then use it in making housing and programming decisions. Targeted interviews with Classification deputies and the PREA Coordinator indicate that the results of the risk assessment and the interview with the inmate is used to determine classification decisions and make individualized determinations for each inmate. There is a limited number of housing areas, however, so if the risk assessment indicates there may be a potential issue, the MCSO has the option to transfer the inmate to the Regional Jail.

MCSO policy requires that the agency will consider housing for transgender or intersex inmates on a case-by-case basis in order to ensure the health and safety of the inmate and take into consideration any potential management or security problems. The policy requires that a transgender or intersex prisoner's own view about their own safety shall be given serious consideration and that all transgender or intersex inmates are given the opportunity to shower separately from other inmates. During the site tour, the auditor reviewed all inmate housing units. All inmate housing units permit inmates to shower separately from one another. The MCSO has not housed any transgender inmates during this reporting period. Interviews with facility staff indicate that placement of any transgender or intersex offenders would be made on a case-by-case basis. The PREA Coordinator and staff confirm that they have not housed a transgender or intersex offender during the audit period. No targeted interviews with transgender or intersex were able to be completed by the auditor. Based upon the fact that no transgender or intersex inmates have been confined in the past 12 months, the auditor could not review any documents related to sections (b-f) of the standards. If a transgender inmate is received at the Montgomery County Jail, they are typically transferred to the Regional Jail the same day.

The policy stipulates that LGBTI inmates will not be placed in a dedicated facility, unit, or wing solely on the basis of such identification or status, unless the placement is established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting such inmates. Staff are aware of their responsibilities should they receive a transgender inmate with regard to this standard. Interviews with facility staff indicate that placement of any transgender or intersex offenders would be made on a case-by-case basis. MCSO policy stipulates that placement and programming assignments for transgender inmates will be reassessed at least twice a year to review any threats to safety and a transgender

	<p>inmate’s views with respect to his or her safety will be given serious consideration. MCSO policy allows for transgender inmates to shower separately. Interviews with facility administration corroborate these practices would be enforced if a transgender offender were received. Interviews with staff indicated that if a transgender inmate were to be received, they would most likely be transferred to the regional jail due to the limited housing options available at the MCSO.</p> <p>LGBTI offenders are not placed in dedicated housing areas. Interviews with staff confirm this practice would not occur. No offenders were identified as gay by the facility, therefore there were no targeted interviews in this category. A targeted interview with the PREA Coordinator revealed that inmate housing was based upon objective findings and LGBTI prisoners were not placed in dedicated units.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ul style="list-style-type: none"> • MCSO Completed PAQ • MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Supervisors Responsible for Supervising Inmates in Restrictive Housing <p>Findings:</p> <p>According to MCSO policy they do not place inmates who are at high risk for sexual victimization in restrictive housing unless alternatives have been considered and are not available. MCSO policies are written in accordance with the standard and cover all mandated stipulations. According to the PAQ, there have not been any instances where inmates at risk for sexual victimization were placed in restrictive housing for the purpose of separating them from potential abusers. Interviews with staff indicate they would not involuntarily place an offender at risk of sexual victimization in segregated housing except as a last resort when all other alternatives had been considered. All staff interviewed indicate an inmate identified as high risk would be</p>

	<p>moved to another housing location and not placed in segregation unless the inmate requested it. A targeted interview with the PREA Coordinator also verified that no inmates during the audit period have been placed in restrictive housing involuntarily in order to separate them from potential abusers. As MCSO does not have segregated housing, only holding cells, inmates identified as high-risk for sexual victimization would be transferred to the Regional Jail.</p> <p>The MCSO Policy states that if inmates were placed in restrictive housing for involuntary protective purposes, any restrictions would be limited until such time as they could be transferred to the Regional Jail.</p> <p>Staff are aware of their responsibilities with regard to this standard. There have been no instances that required action with regard to this standard.</p> <p>During the on-site portion of the audit, the auditor reviewed all of the housing areas and had informal discussions with both inmates and staff. As verified by targeted interview with the PREA Coordinator, the auditor did not identify any inmates who were involuntarily housed in restrictive solely for protective purposes.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Inmate Handbook 4. Inmate Orientation 5. Site Review 6. MCSO Website <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Random Staff • Random Inmates <p>Observation of the following:</p> <ul style="list-style-type: none"> • Observation of informal interactions between staff and inmates • Observation of inmates using the telephone system • Observation of Information Posters inside the housing units, adjacent to telephone

and in the booking area

Findings:

MCSO policy is written in accordance with the standard. The Policy requires multiple mechanisms for the internal reporting of sexual abuse and harassment, retaliation by other inmates or staff for reporting, as well as mechanisms for reporting conditions that may have contributed to the alleged abuse. The auditor reviewed the inmate handbook and found that inmates are informed that they may report instances of abuse or harassment by reporting to staff members, both verbally and in writing, or may contact the Commonwealth Attorney's Office. There are multiple internal ways for offenders to privately report PREA related incidents, including verbally to any staff member, a written note submitted to staff, anonymous reports, and third-party reports. This information is received by offenders at intake, contained in the inmate handbook and on informational posters outside all offender housing areas.

During random staff interviews, all staff mentioned that inmates could make a PREA report to staff, volunteers or contractors as well as make a report using a note. During the site review, the auditor observed posters adjacent to the inmate telephones. Random offender interviews revealed that the offenders would feel comfortable approaching and reporting to staff. They feel that that the staff at MCSO would take any report seriously and act immediately. Offenders felt that staff would ensure their safety. When asked about anonymous reporting, offenders said that they could write a note and leave their name off. Some offenders said they thought there was a hotline and many stated they could report through the tablets.

At the time of the on-site audit, there were no inmates detained solely for civil immigration purposes. The facility reports they have not had any such inmates in the last three years. If the MCSO received an inmate detained solely for civil immigration, staff would provide information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security.

Staff interviews revealed that they are aware of their responsibilities with regard to reporting and would accept and act on any information received immediately. Information on how to report on behalf of an inmate is listed on the agency website. Staff indicated they would accept and act on third-party reports, including from another inmate.

MCSO policy provides a requirement that inmates have the option of reporting incidents of sexual abuse to a public or private entity that is not part of the agency. Offenders have the ability to report outside the MCSO, in writing, to the Department of Corrections. There is also a hotline that offenders have access to for reporting sexual assault and abuse. None of the offenders interviewed mentioned reporting to the DOC as a potential reporting method, indicating the offenders may not be aware of this information. However, all the offenders stated they could, and would just tell a staff member, which indicates a high level of trust by the offenders in the staff. During the site review, the auditor observed PREA informational posters adjacent to the inmate telephones that have information about reporting.

	<p>MCSO policy and the inmate handbook stipulates that 3rd party reports of sexual abuse or harassment will be accepted verbally or in writing. Random inmate and staff interviews revealed that the staff and inmates are aware that third party reports will be accepted and treated just like any other reports.</p> <p>A targeted interview with the PREA Coordinator verified that there are multiple ways to make PREA complaints by both staff and inmates. He mentioned reporting directly to staff, the use of the inmate phone system, anonymous letters, direct letters to the police department or commonwealth's attorney, as well as third party reporting by family and friends. There were no investigative files to review. There have been no allegations of sexual assault or harassment during this audit period.</p> <p>MCSO policy requires that all staff accept reports of sexual abuse or harassment both verbally and in writing and that those reports shall be documented in writing by staff and responded to immediately. During targeted interviews with staff, the majority of the random staff interviewed told the auditors that if an inmate reported an allegation of sexual abuse or harassment, they would immediately intervene by separating the victim and alleged perpetrator. A few of the staff members told the auditor that they would notify their supervisor of such an allegation when they received the report. In all random staff interviews, each staff member stated that they would take action without delay and would accept a verbal complaint and would be required to make a written report of the incident. During random inmate interviews, the inmates were asked if they knew that they could make a verbal report of an incident of sexual harassment. All the inmates stated that they knew that they could just tell a deputy if something happened.</p> <p>Staff may privately report sexual abuse or harassment of inmates either verbally or in writing to their supervisors, or facility administrators directly. Staff members are informed of this provision during PREA training. Staff interviews revealed that they are aware they can go directly to facility administration to report sexual abuse and harassment of inmates and all staff that were randomly interviewed answered that they would report any such incident to their supervisor.</p> <p>After a review, the Auditor determined that the facility meets the minimum requirements of the standard.</p> <p>Corrective Action: None</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ul style="list-style-type: none"> • MCSO Completed PAQ • MCSO PREA Policy

	<ul style="list-style-type: none"> • Inmate Handbook (English and Spanish) <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator <p>Findings:</p> <p>Administrative procedures are in place to address MCSO grievances regarding sexual abuse and harassment, therefore the MCSO is not exempt from this standard. The policies are written in accordance with all provisions of the standard, addressing all required aspects. MCSO reports in the PAQ there have been no grievances filed within the past 12 months alleging sexual abuse. Interviews with the Facility Administrator and the PREA Coordinator confirm the information on the PAQ. Interviews with staff indicate they are aware of their responsibilities with respect to the standard and indicate an inmate would be allowed to file a grievance regarding sexual abuse or harassment without regard to time limit. There have been no instances that required action with regard to this standard.</p> <p>The auditor reviewed the inmate handbook and it contains the general provisions for filing a grievance.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Inmate Handbook and Website 4. Hotline Information 5. MOU with Women’s Resource Center <p>Interviews with the following:</p> <ol style="list-style-type: none"> a. PREA Coordinator b. Random Inmates c. Random and Targeted Staff <p>Observations of the Following:</p> <ol style="list-style-type: none"> a. PREA informational Posters throughout the facility and public areas

	<p>Findings:</p> <p>The MCSO policy is written in accordance with the standard. The facility provides inmates with access to local, state, or national victim advocacy or rape crisis organizations, including toll-free hotline numbers. The policy requires reasonable communications between inmates and those organizations and agencies, in as confidential manner as possible. The MCSO informs inmates of the extent to which these will be monitored prior to giving them access. There have been no incidents reported that required confidential support services during this audit period. Staff interviews indicate they are aware of their obligations under this standard.</p> <p>The auditor reviewed the MCSO informational brochure, which included information regarding the availability of outside confidential support services for victims of sexual abuse and harassment. During the site review, the auditor viewed information and the brochure that notifies inmates of the availability of a third-party reporting hotline. The phone numbers and address were listed in the brochure. MCSO policy requires that inmates and staff are allowed to report sexual abuse or harassment confidentially.</p> <p>Inmates are informed of the services available at intake. Inmate interviews indicated that most of the inmates are aware there are services that are available to them. Most inmates interviewed indicated they knew they could ask to speak to someone if they needed to, but were unsure of specific services that are available.</p> <p>An interview with the PREA Coordinator indicated that inmates are informed about the availability of outside support services that are available, and this is listed in the information that is provided to the inmates. The intake brochure and inmate handbook does inform the inmates that all information will be maintained as confidentially as possible and in accordance with mandatory reporting requirements.</p> <p>In addition, the MCSO has a qualified mental health counselor on-site who is available to the inmates and is able and willing to provide confidential emotional support services to inmates, as well as act in the capacity of a victim advocate should the need arise.</p> <p>The MCSO just recently secured an MOU with the Women’s Resource Center to provide cooperative services to inmate victims of sexual violence at MCJ.</p> <p>There have been no inmates detained solely for civil or immigration purposes.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard</p> <p>Corrective Action: None</p>
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115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Inmate Handbook 4. MCSO Website 5. Staff Interviews 6. Inmate Interviews <p>Findings:</p> <p>The MCSO policy is written in accordance with the standards, stipulating that all third-party reports will be accepted and investigated. The MCSO publicly provides a method for the receipt of third-party reports of sexual abuse or harassment. The Auditor reviewed the MCSO website. The MCSO website has information on its PREA page that indicates contact information for jail officials should any one wish to report an incident of sexual abuse or harassment on behalf of an inmate.</p> <p>Staff interviews reveal that they are aware of their obligation to accept and immediately act on any third-party reports received. Staff indicate they will accept a third-party report from a family member, friend or another inmate. They would document the report and inform their supervisor, and the report would be handled the same as any other allegation or report and investigated thoroughly.</p> <p>Offenders are provided this information at intake and offender interviews indicate that they are aware that family or friends can call or write and report an incident of sexual abuse on their behalf. The offenders felt as if the staff would act on any reports received and take all reports seriously. The offenders feel that the staff take PREA and their safety seriously.</p> <p>The MCSO has not received any third-party reports of sexual assault or harassment during this reporting period.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.61	<p>Staff and agency reporting duties</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p>
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1. MCSO Completed PAQ
2. MCSO PREA Policy

Interviews with the following:

- PREA Coordinator
- Agency Administrator
- Random Staff

Findings:

MCSO policy is written in accordance with the standard and requires all staff, contractors and volunteers to immediately report any knowledge, suspicion or information related to sexual abuse or harassment to a supervisor. During the site review, staff members were asked if they were required by policy to report any instances or suspicions of sexual abuse or harassment. All of the staff members responded that they were required to report any such instances. The auditor also asked the same question of a contracted staff, and she stated that she would report any instance of sexual abuse or harassment. Interviews with staff indicate they are very clear with regard to their duties and responsibilities with regard to reporting PREA related information, including anonymous and third-party reports. During random staff interviews, all of the staff members stated that they were required by policy to report any instance of sexual abuse or harassment or retaliation for making reports. They were also asked if that included alleged behavior by staff or contractors or volunteers. All staff members who were randomly interviewed said that they were obligated to report any such allegations or suspicions, no matter who it involved. Staff articulated their understanding that they are required to report any information immediately and document such in a written report.

MCSO policy requires confidentiality of all information of sexual abuse or harassment beyond what is required to be shared as a part of the reporting, treatment, or investigation, and other security and management decisions. During the random staff interviews, staff were asked about their requirement for maintaining confidentiality. The staff understand the need to keep the information limited to those that need to know to preserve the integrity of the investigation. All the interviewed staff stated that details related to either inmate allegations or staff allegations should remain confidential. When asked who they report or discuss details of a sexual abuse or sexual harassment allegation with, staff informed the Auditor they only discuss details with supervisors and investigators. A targeted interview with the PREA Coordinator verified that all investigative files are kept in a locked cabinet with limited access.

Targeted interviews with the Facility Administrator and the PREA Coordinator verified that all allegations of sexual abuse or harassment received from a third party are referred for investigation.

All allegations of sexual abuse and harassment are reported to the on-duty supervisor, who initiates an investigation. The reporting deputy and supervisor initiate a report, and this report is forwarded to the PREA Coordinator and Jail Lieutenant for review and further action. The Jail Lieutenant or PREA Coordinator will

	<p>contact the investigator depending on the nature of the allegation. The PREA Coordinator is the facility investigator and would initiate any investigation.</p> <p>The Auditor conducted a formal interview with the facility investigator, who indicated that all allegations are immediately reported and investigated. There were no allegations reported on the PAQ, which was verified by multiple staff, including the PREA Coordinator, Jail Lieutenant and Jail Administrator.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.62 Agency protection duties	
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <p>Evidence Reviewed:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator • Random Staff • Random Inmates <p>Findings:</p> <p>MCSO policy is written in compliance with the standard and requires that whenever there is a report that there is an incident of sexual abuse or harassment, the victim should be immediately protected. Random interviews with staff indicate they are very clear about their duty to act immediately if an offender is at risk of imminent sexual abuse. Staff indicated they would immediately remove the inmate from the situation and find alternate housing or placement. Staff stated they would ensure the inmate was kept safe, away from the potential threat and an investigation was completed by the supervisor.</p> <p>The PREA Coordinator would also be notified. Targeted interviews with the Facility Administrator and the PREA Coordinator confirmed that it is the policy of the agency to respond without delay when prisoners are potentially at risk for sexual abuse or any other types of serious risk.</p> <p>Offender interviews consistently revealed that they felt the staff would ensure their</p>

	<p>safety. All inmates interviewed stated that they felt safe in the facility and that the staff genuinely care. For the most part, the inmates stated they felt comfortable going to any staff member and felt confident that the staff would ensure their protection.</p> <p>MCSO reports in the PAQ that there have been no determinations made that an offender was at substantial risk of imminent sexual abuse. The Auditor randomly reviewed files and talked with staff, both formally and informally, and found no evidence that an inmate was determined to be at imminent risk of sexual abuse. There have been no incidents that required action with regard to this standard.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>Findings:</p> <p>The agency’s policy is written in accordance with the standard and requires that if the Sheriff or his/her designee receives an allegation regarding an incident of sexual abuse that occurred at another facility, he must make notification within 72 hours. During this review period, the facility reported receiving no notifications from an inmate alleging sexual abuse while incarcerated at another facility that needed to be reported. According to targeted interviews with the Facility Administrator and PREA Coordinator, if they received such a notice, they would immediately report such an allegation to the facility administrator and document such a notice. They confirmed their understanding of their affirmative requirement to report allegations in accordance with the standard.</p> <p>MCSO requires that if the Sheriff or designee receives notice that a previously incarcerated inmate makes an allegation of sexual abuse that occurred in the MCSO, it would be investigated in accordance with the standards. The MCSO reported receiving no notifications in the past 12 months from another facility that one of their</p>

	<p>former inmates alleged being sexually abused while incarcerated at the MCSO. Interviews with the Jail Administrator and PREA Coordinator confirm the staff are aware of their obligation to fully investigate allegations received from other facilities. There were no instances of notice by another facility that an inmate alleged abuse at the MCSO in the last 12 months.</p> <p>Further, interviews with the staff, contractors and volunteers, both formal and informal, revealed that staff is aware of their obligations with regard to reporting, and there is a universal understanding and commitment to immediately report any allegations of sexual abuse or harassment, which increases the probability that abuse will be detected, reported and investigated.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Flow Chart 4. Interviews with Random Staff <p>Findings:</p> <p>The MCSO policy is written in accordance with the standard and indicates actions staff should take in the event of learning an inmate has been sexually assaulted. Policy requires that when an inmate reports an incident of sexual abuse, the responding staff member: Separate the alleged victim and alleged abuser, preserve and protect and evidence, if the abuse allegedly occurred within a time period that would allow the collection of evidence and advise the victim not take any actions that would destroy any evidence, and take action to prevent the alleged abuser from destroying evidence.</p> <p>There have been no instances of reported sexual assault during this review period.</p> <p>There were no inmates present during the on-site portion of the audit who had reported sexual abuse.</p> <p>The Auditor conducted formal interviews with staff first responders. Security first responders were asked to explain the steps they would take following an alleged sexual abuse reported to them. Most all staff interviewed said that they would notify</p>

	<p>their supervisor after separating the inmates and wait for further instructions. The staff were able to appropriately describe their response procedures and the steps they would take, including separating the alleged perpetrator and victim and securing the scene and any potential evidence. The Auditor was informed the scene would be preserved and remain so until the Investigator arrived to process the scene. A targeted interview with the PREA Coordinator and Jail Administrator indicated that once the initial steps were done and the scene was secure, an Agency Investigator would be notified, depending on the nature of the investigation.</p> <p>The Auditor conducted interviews with supervisory staff and one investigator. The Auditor asked what the supervisor response and role would be following a report of sexual assault. The supervisor stated that they would ensure the alleged victim and alleged abuser were removed from the area and kept separately in the facility. The crime scene would be secured and the alleged victim would be taken to medical for treatment and transported to the ER for a forensic exam, if needed. The PREA Coordinator would also be informed. The supervisor stated the Investigator would be the only person allowed in the crime scene to process the evidence.</p> <p>MCSO Policy requires that if the first responder is not a security staff member, the staff immediately notify a security staff member. There were no instances during the audit period where a non-security staff member acted as a first responder to an allegation of sexual abuse. The Auditor conducted formal interviews with non-security personnel. Staff were asked what actions they take following an alleged sexual abuse reported to them. Staff indicated they would ensure the victim remains with them and immediately inform a deputy.</p> <p>The PREA Coordinator stated they would first ensure a victim’s emergency medical needs are met. They stated they would request the victim not to use the restroom, shower, or take any other actions which could destroy evidence. Victims would be transported off-site for forensic exams if needed.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Flow Chart 4. Interview with PREA Coordinator and Agency Administrator

	<p>Findings:</p> <p>MCSO has a coordinated facility plan to address actions in response to an incident of sexual abuse among facility staff, including first responders, supervisory staff, medical, investigative staff and facility administrators. The MCSO has a flowchart that is a quick reference and good visual aid to assist staff in understanding their role. Interviews with multiple staff indicate that they understand their duties in responding to allegations of sexual assault and are knowledgeable in their role and the response actions they should take. Many of the facility staff involved in responding to incidents of sexual abuse would be a part of the incident review team.</p> <p>The MCSO has made the coordinated response plan available to staff in an area that is easily accessible. The staff were notified via email of the location and asked to review the response plan. Copies of this communication, as well as photos of the location were provided to the Auditor.</p> <p>There have been no instances of reported sexual assault on the PAQ. Interviews with the PREA Coordinator and various staff confirm this information.</p> <p>The auditor interviewed the Jail Administrator, as well as the PREA Coordinator who both described the jail's coordinated response in the case of an allegation of sexual abuse or harassment. The response begins with the allegation and first responder action to protect the victim, secure the crime scene and protect any potential evidence. The initial investigation begins with the first responders and supervisors, the facility investigator, and then the agency investigators, if needed. Depending on the nature of the allegation, the investigation will either begin as administrative or criminal. In the case of a criminal investigation, the victim is treated in accordance with policy and provided forensic exams and ancillary services, as well as advocacy services. The remainder of the investigation is dictated by the nature of the allegation. Regardless, all investigations are completed and a finding is assigned. It may be referred for criminal prosecution or handled administratively and could require medical and mental health services and monitoring for retaliation and notice to the victim about the outcome of the investigation.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence Relied upon to make Compliance Determination:
	1. MCSO Completed PAQ

	<p>2. MCSO Policy PREA Policy</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Agency Administrator <p>Findings:</p> <p>The MCSO has not entered into any agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>The MCSO policy prohibits entering into a collective bargaining agreement. Virginia Code §40.1 - 57.2 prohibits state, county, and municipalities from collective bargaining or entering into a collective bargaining contract with a union with respect to any matter relating to an agency or their employment service.</p> <p>Interviews with both the Facility Administrator and the PREA Coordinator verified that there is not a collective bargaining agreement in place.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Facility Administrator <p>Findings:</p> <p>The agency’s policy is written in accordance with the standard and states that MCJ shall protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by inmates or staff. The Chief Correctional Officer or Asst. Chief Correctional Officer will be responsible for monitoring retaliation.</p> <p>The Auditor conducted a formal interview with the staff member responsible for</p>

	<p>monitoring retaliation. The Auditor asked the staff member how he would go about monitoring retaliation. The staff member stated he would review disciplinary charges and Incident Reports and any other actions related to the inmate including documents maintained in an inmate’s file and his/her electronic record.</p> <p>The Auditor asked the staff member the amount of time he will monitor for acts of retaliation. He stated a minimum of 90 days. In the event the inmate cannot be protected at the facility, the staff member would recommend a transfer to the Regional Jail.</p> <p>The Auditor asked how staff ensures the protection of an inmate who is being retaliated against by a staff member. The Auditor was informed the administration will discuss staff assignments with the supervisor to ensure the staff member is not placed in an area where the inmate is housed. The retaliation would be reported through the chain of command to ensure the staff member who is retaliating against an inmate is appropriately disciplined, if need be.</p> <p>The Facility Administrator and PREA Coordinator indicated that they had the authority to move inmates around the facility or to other facilities or take other protective measures to assure inmates were not retaliated against. In addition, the Facility Administrator has the authority to intervene in any way necessary to protect employees from retaliation if they reported incidents of sexual abuse or harassment. He stated that he would monitor the progress of PREA investigations and require regular briefings by the PREA Coordinator until the investigation is complete.</p> <p>There have been no reported incidents of sexual abuse/harassment that would require the staff to invoke any protections from retaliation. In addition, staff interviews confirmed their knowledge of the requirements for protection from retaliation for both inmates and staff members. All staff members interviewed affirmed that they had an affirmative requirement to report any incident of retaliation and also reported that they know that they could report such incidents anonymously.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ

	<p>2. MCSO PREA Policy</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Facility Administrator <p>Observation of the following:</p> <ul style="list-style-type: none"> • Observation of housing areas <p>Findings:</p> <p>The agency’s policy is written in accordance with the standard and requires the use of segregated housing be subjected to the requirements of PREA standard 115.43. Interviews with staff state they would not place an inmate in segregation for reporting sexual abuse or assault. Staff indicated they would not ordinarily place a sexual assault victim in segregation unless he or she had requested it. Staff explained that other alternatives are explored and segregated housing is utilized as a last resort. MCSO does not have segregated housing and would transfer an inmate to the regional jail if there was a need for segregated housing or if the inmate/victim requested it. They have group holding cells where inmates can be housed temporarily during an investigation or until transfer.</p> <p>During informal discussions with supervising deputies, no staff indicated that inmates were assigned to restrictive housing as a result of their sexual vulnerability.</p> <p>The MCSO has had no incidents that have required restrictive protective custody. Interviews with the supervisory staff as well as the facility administrator and PREA coordinator confirmed their knowledge of their requirements to appropriately adhere to the elements of standard 115.43, after a victim’s allegation of abuse.</p> <p>In addition, during a targeted interview with the PREA Coordinator, he verified that there have been no instances of inmates being placed in restrictive housing as a result of the sexual victimization or vulnerability. There were no records or documentation to review regarding this standard because there were no instances of the use of restrictive housing to protect and inmate who was alleged to have suffered sexual abuse.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence Relied upon to make Compliance Determination:

1. MCSO Completed PAQ
2. MCSO PREA Policy
3. Interviews with Staff
4. Documentation of Investigator Training
5. Certificates of Completion for Departmental Investigators
6. Training Curricula for Investigative Training specific to Corrections

Findings:

The MCSO policy is written in accordance with the standard. Policy requires that the agency conduct administrative and criminal investigations of sexual abuse and harassment. The MCSO policy stipulates that they will respond to complaints that are received internally and externally by a third party. The policy requires that investigations are responded to promptly. The MCSO conducts an investigation on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. The policy requires administrative investigations to include efforts to determine whether staff actions or failure to act contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings. As there have not been any allegations of sexual assault or harassment, and therefore no investigative reports, the auditor could not evaluate whether the reports contained all the required elements.

If at any time during the preliminary investigation, it appears the allegation will not be unfounded, the investigation will be referred to the agency investigators. Montgomery County Sheriff's Office Criminal Investigations Division will conduct investigations using investigators who have received special training in investigations pursuant to §115.34. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving suspected perpetrator. MCJ will maintain written investigative reports for as long as the alleged abuser is incarcerated or employed by the MCSO, plus an additional 5 years. Policy prohibits the termination of an investigation if an inmate is released or a staff member is terminated or terminates employment.

MCSO conducts both administrative and criminal investigations. Investigators are required by policy to cooperate with any outside investigators and attempt to communicate to remain informed about the progress of a sexual abuse investigation. According to targeted interviews with the PREA Coordinator and Jail Administrator, if an outside agency conducts an investigation of sexual abuse, the departmental investigator serves as a liaison and will keep jail administrators informed of the progress of the investigation.

The Auditor conducted a formal interview with one of the facility's Investigators. He verified that the investigators are available to respond immediately, if necessary. The

Auditor asked the Investigator to describe the process when he is conducting an investigation. He stated he interviews the victim, alleged perpetrator, inmate witnesses, and staff witnesses if applicable. He stated he reviews the scene, preserves any evidence if necessary and then begins looking at other documents. He reviews criminal histories on all inmates involved, disciplinary history, incident reports, and classification actions. The investigator reviews video footage if applicable, telephone recordings, staff logs, and any other relevant items which could be considered evidence to support the determination. He will notify the facility administration of the allegation. If at any point during the investigation he determines there could be potential criminal charges involved, the investigation would be reviewed and discussed and the Commonwealth Attorney would be consulted. The Investigator stated he begins an investigation immediately after receiving an allegation.

All investigative files are maintained in the PREA Coordinator's office electronically on the computer and hard copies maintained in a locked cabinet in the office. Investigative files are maintained for a minimum of five years after the abuser has been released or a staff abuser is no longer employed.

The MCSO does not require inmates to submit to a polygraph examination during sexual abuse investigations.

If an allegation is reported anonymously, the PREA Coordinator and Investigator both stated the investigation would be handled the same as any other investigation. Staff indicate they would continue the investigation even if an inmate is released or a staff member terminates employment during the investigation.

The MCSO had no incidents that required investigation during the review period reported on the PAQ. This was confirmed by both the PREA Coordinator and the Investigator.

There have been no criminal investigations or substantiated allegations of sexual abuse or harassment during this audit period.

After a review, the Auditor determined the facility substantially meets the requirements of the standard as there have been no investigations during this audit period. However, the facility will need to ensure that all required elements are included in any investigative reports.

Corrective Action: None

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Investigative Staff <p>Findings:</p> <p>The agency's policy is in compliance with the requirements of the standard and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Formal interviews with the PREA Coordinator and Investigator confirmed that the staff responsible for administrative adjudication of investigations is aware of the requirements of the evidentiary standard. The investigator was able to articulate what preponderance meant and how he arrives at the basis for his determinations. There have been no allegations of sexual abuse or harassment within the last 12 months for which the auditor could review the investigative file.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Facility Administrator <p>Findings:</p> <p>The MCSO policy is written in accordance with the standard and requires an inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. The auditor conducted targeted interviews with the PREA Coordinator and the Facility Administrator. The targeted interviews verified that there have been no sexual assault or harassment</p>

	<p>investigations in the past 12 months. They also verified that if an outside investigation was conducted that they would request the relevant information from the investigative agency to inform the offender. The outside agency would provide a final report to the facility. They confirmed that the final report would be required to contain the elements as required by the standard. The MCSO conducts both administrative and criminal investigations.</p> <p>The Auditor asked if the facility was required to make prosecutorial referrals for all criminal incidents and they said that they were.</p> <p>The Auditor conducted an interview with the PREA Coordinator. The PREA Coordinator indicated that inmates are informed of the results of an investigation at the conclusion of the investigation. A supervisory staff member, investigator or the PREA Coordinator will notify the inmate and document the notification.</p> <p>During the past 12 months, there have been no allegations of sexual abuse. No inmates who reported sexual abuse were in custody during the on-site portion of the audit for targeted interviews.</p> <p>There were no investigative files for the Auditor to review as there have been no allegations in the past 12 months.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Interviews with Staff and PREA Coordinator <p>Findings:</p> <p>The MCSO PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Staff is subject to disciplinary sanctions up to and including termination for violating the sexual abuse or sexual harassment policies. Policy requires that staff found responsible for sexual abuse of an inmate shall be</p>

	<p>terminated from employment. Employees who are found to have violated jail policy related to sexual abuse and harassment, but not actually engaging in sexual abuse shall be disciplined in a manner commensurate with the nature and circumstances of the acts as well as the previous disciplinary history of the staff and comparable to other comparable offenses by other staff with similar disciplinary histories.</p> <p>According to the submitted PAQ, in the past 12 months, there were no staff terminations or disciplinary actions related to the sexual abuse or harassment of inmates. Discussions with the PREA Coordinator and Jail Administrator verified that there were no terminations or disciplinary actions related to sexual abuse or harassment of inmates in the past 12 months.</p> <p>Interviews with facility staff and administrators verified that staff consider a violation of the PREA policy to be of sufficient seriousness to warrant termination and prosecution in accordance with the law. In both formal and informal staff interviews, the staff was aware that the agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.</p> <p>The Auditor interviewed facility administration regarding the facility's staff disciplinary policy. Facility administration indicated that if a staff member is terminated for violating the facility's sexual assault and harassment policy, and if the conduct is criminal in nature, it will be referred to the Commonwealth Attorney's office for possible prosecution. If an employee under investigation resigns before the investigation is complete, or resigns in lieu of termination, that does not terminate the investigation or the possibility of prosecution if the conduct is criminal in nature. The facility still notifies the Commonwealth Attorney's office when a staff member terminates employment that would have otherwise been terminated for committing a criminal act of sexual abuse or sexual harassment.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Interviews with Staff

	<p>Findings:</p> <p>The MCSO PREA and disciplinary policies were reviewed and are in compliance with the requirements of the standard. Policy stipulates that contractors and volunteers who violate the sexual abuse or sexual harassment policies are prohibited from having contact with inmates and will have their security clearance for the MCSO revoked. In the past 12 months, there have been no instances where volunteers or contractors have engaged in sexual abuse or harassment. The Jail Administrator and the PREA Coordinator both verified during targeted interviews that there had been no instances of sexual abuse or harassment by contractors or volunteers in the past 12 months.</p> <p>A targeted interview with a contract staff member verified that they consider a violation of the PREA policy to be of sufficient seriousness to warrant termination from the facility, and possible prosecution in accordance with the law. The contract staff was aware that the agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary.</p> <p>The Auditor interviewed facility administration regarding the disciplinary policy regarding contract staff and volunteers. Facility administration indicated that contractors and volunteers who violate the sexual abuse or sexual harassment policies will have their security clearance revoked immediately. Contract staff would most likely be terminated by the contract employer. If the conduct is criminal in nature, it will be referred to the Commonwealth Attorney's office for possible prosecution and reported to any relevant licensing bodies.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Inmate Handbook 4. Review of Inmate Records 5. Interviews with Staff <p>Findings:</p>

The MCSO policy directs that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy dictates that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. MCSO prohibits sexual activity between inmates. Inmates found to have participated in sexual activity are internally disciplined for such activity. If the sexual activity between inmates is found to be consensual (non-coercive), staff will not consider the sexual activity as an act of sexual abuse.

MCSO policy states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse. According to the submitted FAQ, there have been no instances of inmate-on-inmate sexual abuse or substantiated allegations of staff on inmate sexual abuse or harassment or criminal findings of guilt for inmate-on-inmate sexual abuse. The auditor was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.

According to MCSO policy, disciplinary action for inmates is proportional to the abuse committed as well as the history of sanctions for similar offenses by other inmates with similar histories. The auditor was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.

MCSO policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions. The auditor was not able to review any inmate files related to this standard because there were no instances of inmate on inmate or staff on inmate abuse.

The MCSO does not have mental health staff available at all times, but has mental health staff on call for emergent needs and will transfer inmates to the regional facility if they need more in-depth mental health treatment. Any decision to offer counseling or therapy to offenders and the initiation of any such counseling or therapy for individuals who have committed sexual offenses would be done at the regional jail as the MCSO does not have the availability of those services.

MCSO policy stipulates that inmates will not be disciplined for sexual contact with staff unless it is substantiated that the staff did not consent. There were no unsubstantiated or substantiated instances of inmate on staff sexual abuse or harassment during the audit period.

MCSO policy prohibits disciplining inmates who make allegations in good faith with a reasonable belief that prohibited conduct occurred. There were no instances, in the past 12 months, where inmates were disciplined for filing a report or making unsubstantiated or unfounded allegations of sexual abuse or harassment. The Auditor reviewed classification files, inmate records and interviewed staff. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment.

During this review period, there have been no incidents of non-coercive sexual

	<p>contact for which an inmate has been disciplined.</p> <p>Interviews with staff and inmates confirmed their knowledge of the policy regarding inmates engaging in non-coerced sexual activity. Furthermore, the staff and inmates were aware that the agency has an internal disciplinary process for inmates who engage in sexually abusive behavior against other inmates and knew that they could be disciplined for sexual abuse.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. PREA Screening and Follow-up 4. Random Review of Files 5. Follow up mental health referral within 14 days 6. Interviews with Staff, including the following: <ol style="list-style-type: none"> a. PREA Coordinator 7. Interviews with Inmates <p>Findings:</p> <p>The MCSO policy is consistent with the requirements of the standards. The policy requires staff to offer a follow-up meeting with medical or mental health staff within 14 days of arrival at the facility for an inmate that reports sexual victimization, either in an institutional setting or in the community. During this review period, there have been no instances of an inmate reporting prior victimization. Were that to be the case, the inmate would be transferred to the regional jail, where the inmate could get appropriate follow-up medical and mental health care, if needed. It is the policy of the MCSO to identify, monitor and provide services to inmates who are at risk of sexual victimization, as well as those who have a history of sexually assaultive behavior.</p> <p>The PREA screening completed by the jail staff includes a question that asks the inmate about prior victimization. A PREA screening is also being completed by medical staff at the time of arrival and an inmate is being asked about previous victimization during this screening as well. The inmate is being offered a follow-up meeting with medical or mental health within 14 days if they report prior</p>

	<p>victimization, as required by the standard.</p> <p>A random review of inmate files validated that the screenings and referrals were being conducted in accordance with the standards and the policy.</p> <p>Of the currently housed inmates at the time of the on-site review, there were no inmates identified as having reported previous sexual victimization. The facility reviewed the files of all 41 inmates housed on the first day of the audit to confirm this information.</p> <p>The Auditor conducted a formal interview with medical staff who complete the screening, as well as the mental health staff. Both indicated that inmates identified as needing follow-up care are scheduled to be seen within 14 days or would be transferred to the Regional Jail. When asked who this information would be shared with, staff was clear about confidentiality and that this information would be only be shared with those who needed to know. This information is recorded and maintained electronically on the screening form. Only medical staff and select administrative staff have access to the screening. An interview with the PREA Coordinator confirmed that information related to sexual victimization and sexual abusiveness is kept secure and confidential. This information is limited access and only used to make housing, bed, work, education, and other program assignments.</p> <p>MCSO policy states that medical and mental health personnel will 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. An interview with the PREA Coordinator and mental health staff confirms that they would gain informed consent before reporting information about prior sexual victimization that did not occur in an institutional setting.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Interviews with Staff, including the following: <ol style="list-style-type: none"> a. PREA Coordinator b. Random Security Staff

4. Interviews with Inmates

Findings:

The MCSO policy is written in compliance with the standard and states that all inmate victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Interviews with the PREA Coordinator confirm that victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Contract medical staff are available Monday through Friday 7 a.m. to 11 p.m., and Saturday and Sunday 7 a.m. to 7:30 p.m. There is also a provider on call 24/7 to address any emergent needs.

While there have been no documented incidents of sexual abuse requiring emergency medical or mental health services during the review period, the staff are aware of their responsibilities with regard to protection of the victim and evidence in the case of a report of sexual assault. In addition, medical and mental health staff are on-call 24 hours per day in the case of emergency and for crisis intervention services. In addition, after initial treatment at the hospital, the inmate would be transferred to the regional jail where he (or she) could get follow-up medical and mental health services since the MCSO does not have medical or mental health staff on site 24 hours a day. This was confirmed by the PREA Coordinator. For services that are outside the scope of their experience, the victim can be treated at the local emergency department. Forensic exams are conducted off-site at the local emergency department by qualified forensic nurse examiners. An advocate from the rape crisis center, WRC (Women's Resource Center) is available at the request of the victim and pursuant to the MOU with the MCJ.

MCSO policy states that all inmate victims of sexual abuse will be offered information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. Staff confirmed the fact that they knew that they had an affirmative responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for pregnancy related medical care and/or STD prophylaxis if required. They confirm that victims of sexual abuse would be offered these services. There have been no incidents of sexual assault at the MCSO in the last 12 months requiring these services.

MCSO policy states that forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) at a local hospital without a financial cost to the victim. Interviews with medical staff, as well as the PREA Coordinator confirm that victims of sexual abuse would not be charged for services received as a result of a sexual abuse incident. There have been no incidents of sexual assault at the MCSO in the last 12 months.

After a review, the Auditor determined the facility meets the requirements of the standard.

Corrective Action: None

115.83	<p>Ongoing medical and mental health care for sexual abuse victims and abusers</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Interviews with Staff, including the following: <ol style="list-style-type: none"> a. PREA Coordinator 4. Interviews with Inmates <p>Findings:</p> <p>The MCSO policy is written in compliance with the standard and states that the Jail will offer medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. The evaluation and treatment of such victims will include follow up services, treatment plans, and referrals for continued care following their transfer or release. An interview with the PREA Coordinator confirms that these services would be available to inmates who have been victims of sexual abuse, and these services would be consistent with the community level of care. There have been no instances of sexual abuse during the review period, therefore the Auditor was unable to review any related documentation with regard to follow-up and on-going medical and mental health care.</p> <p>Inmate victims of sexual abusive vaginal penetration while in the Jail will be offered pregnancy tests. Inmate victims who become pregnant while in the Jail will receive comprehensive information about all lawful pregnancy-related medical services. Inmate victims of sexual abuse while in the Jail will be offered tests for sexually transmitted infections as medically appropriate. An interview with staff confirms that female inmates who were victims of abusiveness vaginal penetration would be offered pregnancy tests. Inmate victims of sexual abuse would be offered tests for sexually transmitted infections and emergency prophylaxis. There have been no incidents of sexual assault at the MCSO in the last 12 months requiring these services. Although MCSO does not house female inmates, they do hold them for short periods of time and these services would be provided should an incident occur.</p> <p>MCSO policy states that all treatment services for sexual abuse will be 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. Interviews with staff, as well as the PREA Coordinator confirm that these services would be provided to the inmate at no cost. There have been no incidents of sexual assault at the MCSO in the last 12 months requiring these services.</p> <p>Staff interviews confirmed the presence of policies and procedures consistent with</p>
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	<p>the standard and also confirmed staffs' knowledge of the policy and standard. Interviews with inmates confirm they are generally aware of the availability of services should they request or require them. The rape crisis center, WRC (Women's Resource Center) is available for crisis counseling services and inmates can request to speak with mental health.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Interviews with staff <p>Findings:</p> <p>The MCSO has a policy that governs the review of all substantiated or unsubstantiated allegations of sexual abuse. MCSO policy states that a sexual abuse incident review will be conducted within 30 days after the conclusion of every sexual abuse investigation unless the allegation has been determined to be unfounded. The review team will consist of upper-level management officials, supervisors, investigators, and other staff with pertinent information regarding the incident. During the review period the MCSO reports there have been no investigations of alleged sexual abuse at the facility. This was confirmed by the PREA Coordinator and the Jail Administrator.</p> <p>MCSO policy states that the review team will consider a need to change policy or practice to better prevent, detect, or respond to sexual abuse; if the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, perceived status, gang affiliation; the area in the Jail where the alleged incident occurred to assess whether physical barriers in the area may permit abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff. An interview with a member of the incident review team confirms if there was an incident that required a review, all these factors would be considered. The PREA Coordinator confirms that a report of the findings, including recommendations for improvement, would be completed and submitted to the Jail Administrator for review and approval. The PREA Coordinator also stated any recommendations would be implemented, or the reasons for not</p>

	<p>doing so would be documented.</p> <p>The MCSO has appointed a team that conducts incident reviews at the conclusion of sexual assault investigations as stipulated by the standard. This was confirmed by formal interview of the Jail Administrator and PREA coordinator. A written report of the findings is prepared and maintained by the PREA Coordinator. The PREA Coordinator indicated that the reviews would take place within 30 days of the conclusion of the investigation.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Annual Report 4. Review of Website 5. Interviews with Staff <p>Findings:</p> <p>The MCSO policy is consistent with the requirements of the standard and states that the Jail will collect annually accurate, uniform data for every allegation of sexual abuse necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice and complete an annual report based upon said data. The Auditor reviewed the Annual Report available on the facility website. The annual report, including aggregated sexual abuse data was available for calendar year 2023. The Auditor also reviewed the report for calendar year 2022.</p> <p>The annual report for calendar year 2023 has been completed. The report indicated there had been no allegations or incidents. There was no need for redaction of any information. The report indicates future efforts for 2024, as well as a comparison with the previous year.</p> <p>The auditor reviewed the agency website and this information has been made publicly available.</p> <p>An interview with the PREA Coordinator confirms the agency maintains, reviews, and collects data as needed from all available incident-based documents, including</p>

	<p>reports, investigation files, and sexual abuse incident reviews. Interviews with the PREA Coordinator and Jail Administrator confirm data from the previous calendar year is supplied to the Department of Justice no later than June 30th, if requested. This has not been requested by the DOJ.</p> <p>The facility is collecting and aggregating sexual abuse data on an annual basis as required by the standard. The report uses a standardized set of definitions, which are available on the facility website and in the MCSO policy.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.88	Data review for corrective action
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ with ADP 2. MCSO PREA Policy 3. Annual Report 4. Website with sexual abuse data 5. Interviews with Staff <p>Findings:</p> <p>The MCSO policy is consistent with the requirements of the standard and indicates that data collected pursuant to 115.87 will be made readily available to the public through the Jail's website, excluding all personal identifiers after final approval by the Sheriff. The Auditor reviewed the Annual Reports available on the facility website. The annual report, including aggregated sexual abuse data was available for calendar year 2023. The report indicates that the agency reviewed the data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The reports contain a comparison between the current year's data and previous year's data. The report includes an overview of the facility's plan for addressing sexual abuse, aggregated data, identified problem areas, of which none were found for 2023, corrective measures and planned measures for 2024. The annual report indicates the agency's efforts to address sexual abuse include continually providing inmate education and staff training.</p> <p>Interviews with the PREA Coordinator and the Jail Administrator confirm these efforts.</p> <p>There was no need for redaction of any information. The auditor reviewed the agency website, and this information has been made publicly available.</p>

	<p>The report is approved by the Jail Administrator and there is no personally identifying information in the report.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.89	Data storage, publication, and destruction
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. MCSO Completed PAQ 2. MCSO PREA Policy 3. Annual Report 4. MCSO Website containing sexual abuse data 5. Interviews with Staff <p>Findings:</p> <p>The MCSO policy is consistent with the requirements of the standard, which mandates that sexual abuse data be securely maintained and indicates that data collected pursuant to 115.87 will be made readily available to the public through the Jail’s website, excluding all personal identifiers after final approval by the Sheriff. Policy states the Jail will ensure all data collected is securely retained for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise. The PREA Coordinator maintains all sexual abuse data and files in a locked cabinet in his office. He maintains the investigative files in her office. Aggregated sexual abuse data is gathered from the investigative reports. The Auditor reviewed the facility’s website, which included an annual report with aggregated sexual abuse data, as well as an analysis of the data. There were no personal identifiers contained within the report. The Auditor was informed sexual abuse and sexual harassment data is maintained for a minimum of 10 years after collection.</p> <p>The annual report for calendar year 2023 has been completed. The report indicated there had been no allegations or incidents. There was no need for redaction of any information. The auditor reviewed the agency website and this information has been made publicly available.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

115.401	Frequency and scope of audits
	<p data-bbox="280 188 983 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="280 266 564 300">Auditor Discussion</p> <p data-bbox="280 344 1102 378">Evidence Relied upon to make Compliance Determination:</p> <ol data-bbox="280 383 624 501" style="list-style-type: none"> 1. Previous Audit Report 2. PAQ 3. On-Site Review <p data-bbox="280 539 695 573">Interviews with the following:</p> <ul data-bbox="280 577 740 696" style="list-style-type: none"> • PREA Coordinator • Jail Administrator • Random and Targeted Inmates <p data-bbox="280 734 687 768">Observation of the following:</p> <ul data-bbox="280 804 1358 837" style="list-style-type: none"> • Observation of, and access to all areas of the MCSO during the site review <p data-bbox="280 875 1374 954">The MCSO had its last PREA Audit May 18-19, 2021. The Montgomery County Sheriff's Office only operates one facility.</p> <p data-bbox="280 992 1469 1279">The Auditor reviewed the facility's previous PREA report. The Auditor was given full access to the facility. The facility administration was open to feedback and all recommendations were implemented immediately. The facility provided the Auditor with a detailed tour of the facility. The Auditor was able to request, review and receive all requested documents, reports, files, video, and other information requested, including electronically stored information. All requested documentation was provided in a timely manner.</p> <p data-bbox="280 1317 1469 1559">All staff cooperated with the Auditor and allowed the Auditor to conduct interviews with staff and inmates in a private area. The auditor was permitted to conduct unimpeded private interviews with inmates at the MCSO. Auditor was given private interview rooms to interview inmates, which were convenient to inmate housing areas. The MCSO staff facilitated getting the inmates to the auditor for interviews in a timely and efficient manner.</p> <p data-bbox="280 1597 1442 1715">Auditor did not receive any confidential communication from any inmate at the MCSO, however informal interviews with inmates confirm that they were aware of the audit and the ability to communicate with the auditors.</p> <p data-bbox="280 1753 1342 1787">The auditor was able to observe both inmates and staff in various settings.</p> <p data-bbox="280 1825 1481 2024">Prior to the on-site review, the Auditor sent a letter to be posted in all inmate living areas which included the Auditor's address. The Auditor observed notices posted in each inmate living unit that the Auditor emailed to the PREA Coordinator prior to the Audit. The Auditor received photographic evidence that the notices to inmates were posted six weeks in advance of the first day of the audit.</p>

	<p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence Relied upon to make Compliance Determination:</p> <ol style="list-style-type: none"> 1. Previous Audit Report 2. MCSO Website <p>Interviews with the following:</p> <ul style="list-style-type: none"> • PREA Coordinator • Jail Administrator <p>Findings:</p> <p>The Auditor reviewed the MCSO website which contains a link for the October 2021 PREA Audit Report.</p> <p>After a review, the Auditor determined the facility meets the requirements of the standard.</p> <p>Corrective Action: None</p>

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

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
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).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
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).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	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
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

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

	screening instrument?	
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)	yes

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	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	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	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)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

	including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

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

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

	to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(f)		
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes