

PREA Facility Audit Report: Final

Name of Facility: North Central Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/24/2026

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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.



Auditor Full Name as Signed: Lynni O'Haver

Date of Signature: 06/24/2026

AUDITOR INFORMATION

Auditor name: O'Haver, Lynni

Email: katmai910@icloud.com

Start Date of On-Site Audit: 04/30/2026

End Date of On-Site Audit: 05/01/2026

FACILITY INFORMATION

Facility name: North Central Correctional Facility

Facility physical address: 313 Lanedale, Rockwell City, Iowa - 50579

Facility mailing address:

Primary Contact

Name:	Joshua Mcneil
Email Address:	joshua.mcneil@iowa.gov
Telephone Number:	712-297-7521 ext 211

Warden/Jail Administrator/Sheriff/Director

Name:	Don Harris
Email Address:	don.harris@iowa.gov
Telephone Number:	515-574-4700

Facility PREA Compliance Manager

Name:	Joshua McNeil
Email Address:	joshua.mcneil@iowa.gov
Telephone Number:	712-297-7521 ext 211

Facility Health Service Administrator On-site

Name:	Callie Babcock
Email Address:	callie.babcock@iowa.gov
Telephone Number:	712-297-7521ext285

Facility Characteristics

Designed facility capacity:	494
Current population of facility:	477
Average daily population for the past 12 months:	482
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

Age range of population:	18-77
Facility security levels/inmate custody levels:	SD2/Minimum and Minimum Workout
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	90
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	33
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	29

AGENCY INFORMATION

Name of agency:	Iowa Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	510 East 12th Street, Des Moines, Iowa - 50319
Mailing Address:	
Telephone number:	515-725-5701

Agency Chief Executive Officer Information:

Name:	Beth Skinner
Email Address:	beth.skinner@iowa.gov
Telephone Number:	515-725-5701

Agency-Wide PREA Coordinator Information

Name:	Sonya Sellmeyer	Email Address:	sonya.sellmeyer@iowa.gov
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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:

3

- 115.31 - Employee training
- 115.33 - Inmate education
- 115.54 - Third-party reporting

Number of standards met:

42

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-04-30
2. End date of the onsite portion of the audit:	2026-05-01

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Centers Against Abuse & Sexual Assault Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	494
15. Average daily population for the past 12 months:	482
16. Number of inmate/resident/detainee housing units:	6
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☐ Yes ☒ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics 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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	483
25. 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:	13
26. 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:	16
27. 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:	5
28. 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:	11
29. 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:	4
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	4

31. 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:	0
32. 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:	1
33. 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:	10
34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	88
37. 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:	29

38. 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:	33
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	22
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☒ Age ☒ Race ☒ Ethnicity (e.g., Hispanic, Non-Hispanic) ☒ Length of time in the facility ☒ Housing assignment ☐ Gender ☐ Other ☐ None

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The Auditor was provided with the facility incarcerated individual roster for selection of a random representation of incarcerated individuals. The facility roster includes the incarcerated individual's age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the random interview process.
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
44. 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):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16
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".	

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2
48. 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:	2
49. 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:	2
50. 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:	2
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
52. 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:	4

53. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	North Central CF continues to track the number of incarcerated individuals who identify as transgender or intersex. At the time of the on-site, North Central CF reported no transgender or intersex incarcerated individuals housed at the facility during the on-site phase of the audit. However, per BJA Memorandum dated December 2, 2025, in alignment with Executive Order 14168, targeted interviews with transgender or intersex inmates are no longer applicable to a compliance finding and therefore, were not interviewed under the targeted category.
54. 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:	1
55. 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:	3

56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no incarcerated individuals were placed in segregated housing/isolation for risk of sexual victimization or who alleged to have suffered sexual violence. The Auditor was able to confirm this information during the Auditor's review of investigative files, incarcerated individual files, and through interviews conducted with staff.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☒ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☒ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
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.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	22
63. Were you able to interview the Agency Head?	☒ Yes ☐ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No

65. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
66. Were you able to interview the PREA Compliance Manager?	☒ Yes ☐ No ☐ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ 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)	☒ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☐ Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☒ Education/programming ☐ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

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.

71. Did you have access to all areas of the facility?

☒ Yes

☐ No

Was the site review an active, inquiring process that included the following:

72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

☒ Yes

☐ No

73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?

☒ Yes

☐ No

74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

75. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

76. 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 Auditor conducted eighteen informal interviews with incarcerated individuals and inquired to each - <i>Length of time at facility</i> <i>Received PREA Education</i> <i>How would you report an incident of PREA?</i> <i>Do you feel safe at this facility?</i>
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.	
77. 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
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	Documents from incarcerated individual files (38): <i>IDOC Initial Incarcerated Individual Guide (Orientation)</i> - verifying receipt of IDOC Incarcerated individual Handbook <i>IDOC PREA Staying Safe Guide w/Incarcerated individual name & Signature</i> - verifying receipt of PREA Orientation / Education. <i>Initial Risk Assessment and the Reassessment</i> - verifying initial risk screening assessments and reassessments were completed within the required timeframe. Housing Facility Logs - April 2025 - March 2026 - Unannounced Rounds and Opposite Gender Rounds for the auditing period. 4 - Investigative files of SA & SH.

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.

79. 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	2	0	2	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	2	0	2	0

80. 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	1	0	1	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	2	0	2	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.

81. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	1	1	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	1	1	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.

83. 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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:

2

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☐ Yes ☐ No ☒ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files

98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:

1

99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?

☐ Yes

☒ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)

101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.

No text provided.

SUPPORT STAFF INFORMATION**DOJ-certified PREA Auditors Support Staff**

102. 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

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. 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

Identify the name of the third-party auditing entity

Corrections Consulting Services

Standards	
Auditor Overall Determination Definitions	
- Exceeds Standard (Substantially exceeds requirement of standard) - Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) - Does Not Meet Standard (requires corrective actions)	
Auditor Discussion Instructions	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central Correctional Facility (North Central CF) PAQ Iowa Department of Corrections Organizational Chart Iowa Department of Corrections, North Central Correctional Facility (North Central CF) Organizational Chart Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: PREA Coordinator

PREA Compliance Manager

Facility Warden

Site Review Observations:

During the tour of the facility, the Auditor witnessed standardized bulletin boards, throughout the facility, in multiple locations, consisting of current agency and facility PREA Zero-Tolerance PREA packets, Audit Notices printed on bright colored paper, internal and external reporting information for incarcerated individuals.

Findings (By Provision):

115.11 (a) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states it is the policy of the IDOC to provide a safe, humane, and secure environment, free from the threat of sexual violence or retaliation for all incarcerated individuals under correctional supervision whether in institutional, residential, parole, probation and work release status, by maintaining a program of education, prevention detection, response, investigation, prosecution, and tracking. IDOC has a zero-tolerance for sexual violence of any kind which includes sexual violence and sexual harassment.

115.11 (b) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states the person designated by the Director with the sufficient time and authority to serve as the department-wide coordinator to develop, implement, and oversee agency efforts to comply with the PREA Standards in all IDOC institutions. Responsibility includes direct supervision of the PREA Compliance Managers and PREA compliance within the institutions and CBCs. The position of the PREA Coordinator in the agency’s organizational structure is the Supervisor of the Division of Investigative Services. The agency’s organizational chart reflects the PREA Coordinator position is an upper-level position and is agency wide. The PREA Coordinator reports to the Deputy Director of Institution Operations.

The Auditor conducted an interview with the PREA Coordinator who verified she has sufficient time and authority in his position to accomplish PREA responsibilities for the agency. The PREA Coordinator oversees nine prison PREA Compliance Managers and eight Community District PREA Compliance Managers who monitor and support PREA compliance at each of their designated facilities. The PREA Coordinator reports directly to the Deputy Director of Institution Operations. A review of the IDOC organizational chart provided evidence that the agency has designated an upper-level

	position as the PREA Coordinator. 115.11 (c) – Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> states each IDOC institution shall designate a PREA Compliance Manager with sufficient time and authority to coordinate the institutions efforts to comply with the PREA standards. The North Central CF organizational chart reflects the PREA Compliance Manager (Deputy Warden) reports to the Facility Warden. Evidence shows that the Iowa Department of Corrections has designated a facility PREA Compliance Manager as verified through a review of the North Central CF organizational chart and through interviews with the PREA Compliance Manager and the Facility Warden. The Auditor interviewed the PREA Compliance Manager assigned to the North Central Correctional Facility (North Central CF) and verified he has sufficient time and authority in his position to accomplish the PREA responsibilities. The Auditor interviewed the Facility Warden and confirmed the responsibilities of the PREA Compliance Manager assigned to the North Central Correctional Facility (North Central CF). The Facility Warden verified that the PREA Compliance Manager is provided with sufficient time and authority in his position to accomplish these responsibilities. Upon review of the policy, the agency organizational chart, and upon completion of interviews, North Central Correctional Facility (North Central CF) demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Interviews conducted with: Agency Contract Administrator

	Findings (By Provision): 115.12 (a-b) – Iowa Department of Corrections does not contract with other agencies for the confinement of incarcerated individuals. The agency has not entered or renewed a contract for the confinement of incarcerated individuals since the last PREA audit. The Auditor conducted interviews with the Facility Warden and PREA Coordinator who confirmed that North Central CF does not contract for the confinement of incarcerated individuals. Upon review of the policy and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-PR-03, Administration & Management</i> Iowa Department of Corrections Policy <i>IO-SC-01, Institutional Operations</i> Iowa Department of Corrections North Central CF 2026 Staffing Plan Facility Blueprint Facility Housing Logs (all shifts) Interviews conducted with: Facility Warden PREA Coordinator

PREA Compliance Manager

Intermediate or Higher-Level Facility Staff

Site Review Observations:

Daily operational functions

Documentation of unannounced rounds

Findings (By Provision):

115.13 (a) – Iowa Department of Corrections Policy *AD-PR-03, Administration & Management* states IDOC shall ensure that each facility it operates shall develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides adequate staffing levels, and where applicable, video monitoring, to protect incarcerated individuals against sexual violence. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration:

- Generally accepted detention and correctional practices, as in planning their budget process;
- Any judicial findings of inadequacy;
- Any findings of inadequacy from Federal investigative agencies;
- Any inadequacy from internal or external oversight bodies;
- All the components of the facility's physical plant (including blind spots or areas where staff or offenders may be isolated);
- Composition of incarcerated individual population;
- Number of and placement of supervisory staff;
- Institution programs occurring on a particular shift;
- Any applicable State or local laws, regulations, or standards;
- Prevalence of substantiated and unsubstantiated incidents of sexual violence;
- Any other relevant factors.

115.13 (b) – Iowa Department of Corrections Policy *AD-PR-03, Administration & Management* states in circumstances where the staffing plan is not complied with, the facility shall document and justify all deviations from the plan. These documented deviations and justifications shall be sent to the Deputy Director of Institution Operations for review.

The average daily number of incarcerated individuals on which the facility-staffing plan was predicated was 512. The facility reported no deviations from the staffing plan in the last twelve months.

The Auditor conducted an interview with the Facility Warden and discussed documentation of deviations from the staffing plan. The Facility Warden confirmed that all instances of non-compliance with the staffing plan are documented in accordance with agency policies and procedures. The Facility Warden confirmed that North Central CF did not have any deviations during the twelve-month auditing period.

115.13 (c) – Iowa Department of Corrections Policy *AD-PR-03, Administration & Management* states whenever necessary, but no less frequently than once each year, for each facility the IDOC operates, in consultation with the PREA Coordinator, the IDOC shall assess, determine, and document whether adjustments are needed to:

- The staffing plan established pursuant to procedures outlined;
- The facility’s deployment of video monitoring systems and other monitoring technologies; and
- Resources the facility has available to commit to ensure adherence to the staffing plan.

During the pre-on-site phase of the audit, the Auditor reviewed the Iowa Department of Corrections North Central CF Annual Staffing Plan 2026. The North Central CF Annual Staffing Plan provided a detailed review of the facility as well as addressing the required considerations outlined in the agency policy and provision (a) of this standard.

The Auditor conducted an interview with the Facility Warden regarding the North Central CF Staffing Plan. The Facility Warden discussed how the facility’s staffing levels are based on each facility’s design, mission, incarcerated individual population, and custody level. The Facility Warden confirmed when developing a staffing plan, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the incarcerated individual population, the prevalence of substantiated and unsubstantiated allegations of sexual violence, incarcerated individual-on-incarcerated individual assaults, and uses of force. To ensure compliance with the staffing plan, Facility Warden and Supervisory / Executive Staff conduct rounds throughout the facility for visual verification of the staffing plan.

The Auditor conducted an interview with the PREA Compliance Manager and confirmed the process of developing a staffing plan previously described by the Facility Warden. The PREA Compliance Manager also confirmed that an assessment of the facility-staffing plan is conducted annually, and each are consulted regarding any adjustments to the staffing plan.

115.13 (d) – Iowa Department of Corrections Policy *IO-SC-01, Institutional Operations* states Shift Supervisors or designated alternate supervisor, shall tour every main living unit of the institution at least once each shift. Satellite living units such as minimum live out sites shall be routinely inspected by supervisory staff at least weekly. The Associate Warden of Security shall routinely review logs and other documentation of such tours.

Iowa Department of Corrections Policy *IO-SC-01, Institutional Operations* states staff is prohibited from alerting other staff members that these supervisory rounds are occurring, unless the announcement is related to the legitimate operational functions of the facility.

The Auditor reviewed the average daily number of incarcerated individuals' report, staff rosters, facility blueprint, and daily incarcerated individual activity schedules to verify adequate staff coverage in comparison to incarcerated individual population, incarcerated individual movement, and facility size and layout.

The Auditor toured the facility and observed the daily operational functions, staff interacting with incarcerated individuals, general incarcerated individual movement, incarcerated individuals out at recreation, incarcerated individuals participating in programs, incarcerated individuals completing job assignments, and supervisory staff conducting rounds. These observations provided additional verification of policy and of standard compliance.

The Auditor reviewed twelve months of housing logs documenting supervisor unannounced rounds and verified the unannounced rounds are being conducted and documented in accordance with agency policy and the PREA Standard. The housing logs reviewed covered the twelve-month auditing period, were from each housing facility, and covered all shifts. In the housing logs reviewed, the Auditor did not find any consistent patterns or inadequacies.

The Auditor conducted supervisory level staff interviews and inquired how

	unannounced rounds are completed without staff knowledge. Supervisory level staff indicated this is completed by observing staff movement, monitoring radio transmissions, alternating movement patterns or being unpredictable with times or walking pattern and listening to staff conversations while conducting rounds throughout the facility. Supervisory staff also indicated that all staff are aware of the existing agency policy governing unannounced rounds and any violation of policy will be handled with disciplinary action. Upon review of the policies and documentation provided and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IS-CL-07, Institutional Services, Classification</i> Interviews conducted with: Facility Warden PREA Compliance Manager Site Observation: The facility tour and formal and informal interviews with incarcerated individuals and staff demonstrated youthful, incarcerated individuals were not housed at the facility. Findings (By Provision): 115.14 (a) – Iowa Department of Corrections Policy <i>IS-CL-07, Institutional Services, Classification</i> designates specific IDOC facilities to house youthful, incarcerated individuals.

	North Central CF is not designated as a youthful incarcerated individual facility. This was verified during interviews with the Facility Warden, PREA Compliance Manager, and Classification Staff. Upon review of the policy and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IO-SC-17, Institutional Operations, Cross-Gender Supervision</i> Iowa Department of Corrections Policy <i>IO-SC-18, Institutional Operations, Searches</i> Iowa Department of Corrections Policy <i>HSP-704, Health Services, Management of Gender Dysphoria</i> Iowa Department of Corrections Policy <i>AD-TS-04, Administration & Management, Training & Staff Development</i> Iowa Department of Corrections Training Curriculum / Records Interviews conducted with: Random Incarcerated individuals Random Staff Site Review Observations: Daily operational functions Staff interaction with Incarcerated individuals

Light and buzzer activation, opposite gender announcements

Incarcerated individual movement

Findings (By Provision):

115.15 (a) – Iowa Department of Corrections Policy *IO-SC-18, Institutional Operations, Searches* states unclothed body searches shall be conducted by staff of the same gender as the incarcerated individual being searched or gender as identified per HSP-704 unless search procedures are otherwise outlined in the treatment plan.

115.15 (b) – Iowa Department of Corrections Policy *IO-SC-18, Institutional Operations, Searches* states staff of the opposite sex may perform an unclothed body search and visual body search, in exigent circumstances. Searches conducted under exigent circumstances require two staff members and the search has been approved by the Warden or Institution Duty Officer.

115.15 (c) – Iowa Department of Corrections Policy *IO-SC-18, Institutional Operations, Searches* states staff shall document the reasons for the opposite sex search by memorandum and forward to the Warden through the Associate Warden of Security.

Documentation provided by the facility indicated there were no cross-gender strip searches or cross-gender visual body cavity searches conducted during the twelve-month auditing period. The Auditor confirmed this information during her interviews with the PREA Compliance Manager and the Facility Warden.

115.15 (d) – Iowa Department of Corrections Policy *IO-SC-17, Institutional Operations, Cross-Gender Supervision* states the facility shall implement procedures that enable incarcerated individuals to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except when viewing is incidental to routine cell checks. Incarcerated individuals shall be made aware of the fact that staff of the opposite gender will be present in the housing unit.

The Auditor requested an up-to-date incarcerated individual facility roster. The facility roster provides a list of all incarcerated individuals currently at the facility and is organized by housing facility, provides incarcerated individual characteristics such as

age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process. All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-two incarcerated individual interviews, and all twenty-two incarcerated individuals interviewed confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, all twenty-two incarcerated individuals confirmed staff of the opposite gender announce their presence and activate a light and a “very loud” buzzer prior to entering the housing unit. The facility utilizes a light and a buzzer system to indicate when staff of the opposite gender enters a housing unit. IDOC policy requires the light to remain on until the opposite gender staff exit the housing unit. The facility communicates the meaning of the light and buzzer to incarcerated individuals upon arrival to the facility and through postings in each housing unit.

The Auditor reviewed documentation to include shift rosters, shift assignments, and daily incarcerated individual activity schedule. The Auditor observed the facility operations throughout the day, to include continuous incarcerated individual movement throughout the facility, continuous physical interactions between staff and incarcerated individuals, incarcerated individuals participating in-group activities, and incarcerated individuals performing job assignments throughout the facility. The Auditor compared the information reviewed with her observations made during the facility tour and noted the number of male and female staff members are more than adequate to meet the standard requirements and the adequate number of male and female staff members covers all shifts. The Auditor also observed the announcement of an opposite gender and activation of the light and buzzer when entering each housing unit throughout the facility tour, which provided additional documentation and the facility's compliance with this standard.

115.15 (e) – This provision is no longer applicable to a compliance finding.

115.15b (f) – This provision is no longer applicable to a compliance finding.

Iowa Department of Corrections Policy *AD-TS-04, Administration & Management, Training & Staff Development* states such training shall be tailored to the gender of the incarcerated individuals at the employee’s facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male

	incarcerated individuals to a facility that houses only female incarcerated individuals or vice versa. The Auditor reviewed the training records and training curriculum provided to staff members who may have contact with incarcerated individuals, how to perform cross-gender pat-down searches of incarcerated individuals. Training records indicated staff members receive training on the agency's PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined the agency's policy on cross-gender pat-down searches of incarcerated individuals, policy defining exigent circumstances, and conducting searches in a professional and respectful manner. The Auditor interviewed random staff members and inquired if they had received training on how to conduct cross-gender pat-down searches of incarcerated individuals in a professional manner, consistent with security needs. Each staff member confirmed receiving training on cross-gender searches of incarcerated individuals annually during Annual In-Service Training. Additionally, staff confirmed receiving refresher training on a monthly and quarterly basis. Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and with the requirements that complies with the PREA standard.
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IS-RO-02, Institutional Services, Reception & Orientation</i> Iowa Department of Corrections Contract with Language Link Iowa Department of Corrections <i>Staying Safe: A Guide for Offender Conduct (English/Spanish)</i>

Interviews conducted with:

Facility Warden

Targeted Incarcerated individuals (Limited English Proficient, Hearing, Vision, Physical or Cognitive Impaired)

Random Staff

Site Review Observation:

Standardized PREA bulletin boards (English & Spanish)

Findings (By Provision):

115.16 (a) – Iowa Department of Corrections Policy *IS-RO-02, Institutional Services, Reception & Orientation* states the IDOC shall take appropriate steps to ensure that incarcerated individuals with disabilities, including incarcerated individuals who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of IDOC’s efforts to prevent, detect, and respond to sexual assault, sexual violence, and sexual harassment.

115.16 (b) – Iowa Department of Corrections Policy *IS-RO-02, Institutional Services, Reception & Orientation* states the IDOC shall take reasonable steps to ensure meaningful access to all aspects of the department’s efforts to prevent, detect, and respond to sexual assault, sexual violence, and sexual harassment to incarcerated individuals who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

Iowa Department of Corrections Policy *IS-RO-02, Institutional Services, Reception & Orientation* states IDOC shall ensure that written materials are provided in formats or through methods that ensure effective communication with incarcerated individuals with disabilities, including incarcerated individuals who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

115.16 (c) – Iowa Department of Corrections Policy *IS-RO-02, Institutional Services,*

Reception & Orientation states IDOC shall not rely on incarcerated individual interpreters, incarcerated individual readers, or other types of incarcerated individual assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the incarcerated individual's safety, the performance of first-response duties or the investigation of the incarcerated individual's allegations. Staff shall follow appropriate IDOC policies and procedures for obtaining a qualified interpreter. In the last twelve months the facility has had zero instances where incarcerated individuals were used as interpreters.

The Auditor conducted interviews with random staff members and each staff member confirmed the agency policy prohibiting the use of an incarcerated individual to provide translation services except in limited circumstances where an extended delay in obtaining an interpreter could compromise the incarcerated individual's safety; all staff members acknowledged the use of either the language line (interpreter services) or contacting another staff member to translate.

The Auditor conducted interviews with targeted incarcerated individuals with either a physical, hearing, vision, or cognitive impairment or who were Limited English Proficient. Each incarcerated individual acknowledged receiving PREA information during the intake / transfer process. Each incarcerated individual described receiving the comprehensive PREA orientation within the first few days after arriving at the facility. Additionally, each incarcerated individual acknowledged the information was provided to him in an accessible format specific to his individual needs. For the targeted interviews with an LEP incarcerated individual, the Auditor utilized a certified interpreter for translation services.

The Auditor conducted an interview with the PREA Compliance Manager regarding how the facility takes appropriate steps to ensure that all incarcerated individuals have an equal opportunity to participate in the facility's efforts to prevent, detect, and respond to sexual violence and sexual harassment. The PREA Compliance Manager detailed the efforts made by the facility to ensure impaired incarcerated individuals are provided opportunities and benefits equal to those of unimpaired incarcerated individuals. Incarcerated individuals with either impairments or LEP incarcerated individuals are provided with alternatives to accommodate participation in PREA education such as videos and brochures tailored to their primary language.

Upon review of the policies, IDOC incarcerated individual intake procedures, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard Auditor Discussion Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-PR-05, Administration & Management, Personnel</i> Iowa Department of Corrections Policy <i>AD-GA-13, Administration & Management, General Administration</i> Interviews conducted with: Administrative / Human Resources Staff Site Review Observation: Documentation was reviewed which demonstrated completed background checks upon hire and every five years thereafter. Administrative questions are asked during the application process. The agency does represent being able to show institutional references requested during the hiring process. Findings (By Provision): 115.17 (a) – Iowa Department of Corrections Policy <i>AD-PR-05, Administration & Management, Personnel</i> states the IDOC shall not hire or promote anyone, who may have contact with incarcerated individuals, who: • Has engaged in sexual violence in a prion, jail, lockup, community confinement facility, juvenile facility, or other institution, as defined in 42 USC 1997; • Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent or refuse; or • Has been civilly or administratively adjudicated to have engaged in the 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.

115.17 (b) – Iowa Department of Corrections Policy *AD-PR-05, Administration & Management, Personnel* states the institution/community-based corrections shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, who may have contact with incarcerated individuals.

Iowa Department of Corrections Policy *AD-GA-13, Administration & Management, General Administration* states IDOC shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor who may have contact with incarcerated individuals.

115.17 (c) – Iowa Department of Corrections Policy *AD-PR-05, Administration & Management, Personnel* states before hiring new employees who may have contact with incarcerated individuals, the following shall be completed:

- Perform a criminal records check in accordance with IDOC Policy *AD-PR-07, Background Checks for Applicants and Current Employees* and maintain documentation in the designated local Human Resources Office; and
- Consistent with Federal, State, and local law, contact all prior institutional/facility employers for information on substantiated allegations of sexual violence or any resignation during pending investigation of allegations of sexual violence.

According to the information provided in the PAQ, North Central CF reported in the twelve months prior to the audit, thirteen criminal background checks were performed of persons hired or promoted who may have contact with incarcerated individuals.

115.17 (d) – Iowa Department of Corrections Policy *AD-GA-13, Administration & Management, General Administration* states IDOC shall also perform a criminal background records check before enlisting the services of any contractor who may have contact with incarcerated individuals. North Central CF reported, in the twelve months prior to the audit, thirteen criminal background checks were performed on all staff covered in the contract who may have contact with incarcerated individuals.

115.17 (e) – Iowa Department of Corrections Policy *AD-PR-07, Background Checks for*

Applicants and Current Employees states IDOC shall conduct criminal background records checks must be conducted on all employees every five years.

Iowa Department of Corrections Policy *AD-GA-13, Administration & Management, General Administration* states IDOC shall conduct criminal background records checks at least every five years of contractors who may have contact with incarcerated individuals.

115.17 (f) – Iowa Department of Corrections Policy *AD-PR-05, Administration & Management, Personnel* states the institution/community-based corrections shall ask all applicants and employees who may have contact with incarcerated individuals directly about previous misconduct in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees.

115.17 (g) – Iowa Department of Corrections Policy *AD-PR-05, Administration & Management, Personnel* states the institution/community-based corrections shall also impose on employees a continuing affirmative duty to disclose any such misconduct. Material omissions regarding misconduct, or the provision of materially false information, shall be grounds for termination.

115.17 (h) – Iowa Department of Corrections Policy *AD-PR-05, Administration & Management, Personnel* states unless prohibited by law, IDOC shall provide information on substantiated allegations of sexual violence involving a former employee after receiving a request from an institutional/community-based corrections employer for whom such employee has applied to work. The request must include permission to release such information signed by the former employee.

The Iowa Department of Corrections conducts criminal background records checks for all applicants, employees, or contractors who may have contact with incarcerated individuals. Each criminal background records check includes fingerprints, NCIC, prior employment, Iowa Corrections Offender Network (ICON), and ICON View by social security number.

The Auditor conducted an interview with North Central Correctional Facility 's Administrative/ Human Resources personnel who confirmed the facility conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a contractor or volunteer

	and at least once every five years. The HR Staff Member confirmed the IDOC requirement imposed upon all employees to disclose any previous misconduct and the agency's requirement to provide information regarding a former employee upon request of another institution or agency. Upon review of the policies and review of personnel files, background checks, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Security Operations Manual 07.02, <i>Security Surveillance Systems</i> Interviews conducted with: Agency Head Facility Warden 115.18 (a) - Iowa Department of Corrections Security Operations Manual 07.02, <i>Security Surveillance Systems</i> outlines the agency's procedures for conducting annual reviews of video monitoring systems and the installation of new video surveillance equipment to ensure adequate coverage is provided to protect incarcerated individuals from sexual violence. The North Central CF PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit. 115.18 (b) - The North Central CF PAQ states the facility has added or updated

cameras to the facility's video monitoring system since the last PREA audit.

The Auditor conducted an interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility affects the ability to protect incarcerated individuals from sexual violence. The Agency Head explained how facility modification has always been focused on providing safety to both staff and incarcerated individuals. The agency considers the custody classification of incarcerated individuals housed at the facility, past incidents, input from the PREA Coordinator, input from the incident review team at the facility, national standards and best practices.

The Auditor also inquired to the Agency Head how does the agency use monitoring technology to enhance the protection of incarcerated individuals from incidents of sexual abuse. The Agency Head explained the agency utilizes monitoring technology by ensuring current technology is placed appropriately through incident reviews and ongoing reviews by the PREA and Security Compliance teams. The agency upgrades technology when improvements are needed as indicated by incident reviews and ongoing assessments.

The Auditor conducted an interview with the Facility Warden who confirmed that prior to designing or acquiring any new facility or when planning any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect incarcerated individuals from sexual violence. The Facility Warden confirmed to the Auditor that North Central CF has not undergone modifications or expansions to the facility since the last audit.

The Facility Warden also confirmed that prior to the installation of cameras the facility shall consider how the addition of such technology would enhance the agency's ability to protect incarcerated individuals from sexual violence. The Facility Warden confirmed to the Auditor that North Central CF has added additional cameras since the last PREA audit.

Upon review of the policy and upon completion of the interviews conducted, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-PR-13, Administration & Management, Employee Investigations & Discipline</i> Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>IO-SC-22, Institutional Operations, Evidence Handling</i> Iowa Department of Corrections Policy <i>HSP-628, Health Services, Patient Sexual Violence</i> IDOC, North Central Correctional Facility MOU w/Centers Against Abuse & Sexual Assault (CAASA) SANes / SAFEs Uniform Evidence Protocol Interviews conducted with: Medical Staff Random Staff Incarcerated individuals who reported sexual violence Victim Advocate Findings (By Provision): 115.21 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states the designated Deputy Director/Designee shall ensure that an administrative or criminal investigation is completed for all allegations of sexual violence, sexual misconduct, sexual harassment, or retaliation. Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> states all allegations and incidents of incarcerated individual-on-incarcerated

individual sexual violence, retaliation, and staff neglect or violation of duty that may have contributed to such an incident shall be reported to the Warden, the institution's sexual violence investigator, and the Deputy Director of Institution Operations/ Designee.

Iowa Department of Corrections Policy *AD-PR-13, Administration & Management, Employee Investigations & Discipline* states incidents of staff sexual misconduct, sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to such incidents shall be reviewed and assigned for investigation by the IDOC Division of Investigative Services (DIS) Unit.

115.21 (b) – Iowa Department of Corrections Policy *IO-SC-22, Institutional Operations, Evidence Handling* states in cases of suspected sexual assault, shall follow the established uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The protocol shall be developmentally appropriate for youth where applicable, and as appropriate, shall be 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.

The Auditor established, from a thorough review of IDOC policy, and the SANEs/SAFEs evidence protocol, that investigators assigned to the IDOC Division of Investigative Services (DIS) Unit follow the United States Department of Justice, *A National Protocol for Sexual Assault Medical Forensic Examinations* a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

The Auditor interviewed random staff members regarding his/her role as a First Responder to an allegation of sexual violence. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and immediately notify shift supervisors, Medical and Mental Health Practitioners. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual violence allegation as well as his or her role as a First Responder.

115.21 (c) – Iowa Department of Corrections Policy *IO-SC-22, Institutional Operations, Evidence Handling* states the institution shall offer all victims of sexual assault access to forensic medical examinations, at an outside medical facility, without financial cost, where evidentiary or medically appropriate. Such examination shall be performed by a Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) where possible. If SAFE nor SANE cannot be made available, the examination may be performed by other qualified medical practitioners at the outside medical facility. The institution shall document its efforts to provide SAFE or SANE.

According to the information previously reported in the PAQ, there were no forensic exams completed during the twelve-month auditing period. The Auditor conducted an interview with medical staff responsible for the coordination of forensic examinations. The Medical Practitioner provided the Auditor with an overview of the procedures if a forensic exam was needed, such services are provided at the nearest local hospital with the forensic exam being completed by a certified SANE Nurse. The Medical Practitioner also confirmed there were no forensic examinations completed within the past twelve months for North Central CF.

115.21 (d) – Iowa Department of Corrections Policy *HSP-628, Health Services, Patient Sexual Violence* states the Shift Supervisor shall attempt to make available to the patient a victim advocate from a community crime victim center. If a community crime victim center is not available to provide victim advocate services, the Shift Supervisor shall make these services available through a qualified staff member from a community-based organization, or a qualified IDOC staff member. The Shift Supervisor shall document such efforts.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or harassment and inquired after reporting, did the facility allow him to contact anyone. The incarcerated individual confirmed to the Auditor, after reporting the incident, he was able to meet with Medical and Mental Health Practitioners and was informed of the additional services available from a Qualified Staff Member or the Centers Against Abuse & Sexual Assault. The incarcerated individual confirmed accepting the services from the Qualified Staff Member. Documentation and investigative files reviewed by the Auditor confirmed that victim advocacy services were offered and accepted by the incarcerated individual.

115.21 (e) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states if requested by the alleged victim, the victim advocate or qualified IDOC staff member, or qualified community-based organization staff member shall:

- Accompany and support the victim through the forensic medical examination process and investigatory interviews; and
- Provide emotional support, crisis intervention, information, and referrals.

The Auditor reviewed the existing MOU between North Central Correctional Facility and the Centers Against Abuse & Sexual Assault. The contract uses clear and concise language, detailing the facilities responsibilities, the contractor's responsibilities, and the mutual responsibilities for each.

Centers Against Abuse & Sexual Assault (CAASA) provides comprehensive support services for survivors and victims of sexual assault. Centers Against Abuse & Sexual Assault provides free, confidential, trauma-informed advocacy to individuals affected by sexual violence. Services provided by CAASA include crisis and emotional support services, medical advocacy, accompaniment during forensic exams, crisis counseling, safety planning, trauma-informed care, legal advocacy, and a 24-hour Hope Line.

The Auditor conducted an interview with an advocate from the Centers Against Abuse & Sexual Assault, and she confirmed the existing agreement, responsibilities within the agreement, and an overview of services provided to incarcerated individual victims of sexual assault. The services include safety planning and support services, accompaniment and support during forensic exams or investigatory interviews if requested and provide the victim with resources and information.

The Auditor conducted an interview with a staff member designated as a qualified victim advocate. The staff member confirmed the designation of victim advocate at North Central CF and received the required advocacy training. The staff member confirmed the services provided include emotional support services, accompaniment to forensic exams and investigatory interviews, crisis intervention, and provide referrals and resources for continued follow-up emotional support services.

115.21 (f, g, h) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the designated Deputy Director/Designee shall ensure that an administrative or criminal investigation is completed for all allegations of sexual violence, sexual misconduct, sexual harassment, or retaliation.

Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states any State entity or Department of Justice component that conducts such

	investigations shall do so pursuant to these requirements. Upon review of the policies, documentation, observations made during the facility tour, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-PR-13, Administration & Management, Employee Investigations & Discipline</i> Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections, Division of Investigative Services Investigator Training, Credentials Iowa Department of Corrections Agency Website Interviews conducted with: Agency Head Investigative Staff Site Review Observation: SA/SH Investigation files (4) Findings (By Provision):

115.22 (a) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the designated Deputy Director/Designee shall ensure that an administrative or criminal investigation is completed for all allegations of sexual violence, sexual misconduct, sexual harassment, or retaliation.

The Auditor conducted an interview with the Agency Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual violence or sexual harassment. The Agency Head explained once an allegation is received and after the initial protective steps are taken, an incident report is submitted by the institution to the IDOC Division of Investigative Services (DIS). The report is approved by the supervisor of DIS and is assigned to an investigator. Upon completion of the investigation, the investigative report is submitted to the Deputy Director of Institutions, the Assistant Deputy Director, the DIS Supervisor, the Warden, and the PREA Coordinator. In cases of substantiated findings, the proper administrative corrective action is utilized and any appropriate criminal referrals for prosecution are made.

115.22 (b-c) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states all allegations and incidents of incarcerated individual-on-incarcerated individual sexual violence, retaliation, and staff neglect or violation of duty that may have contributed to such an incident shall be reported to the Warden, the institution’s sexual violence investigator, and the Deputy Director of Institution Operations/Designee.

Iowa Department of Corrections Policy *AD-PR-13, Administration & Management, Employee Investigations & Discipline* states incidents of staff sexual misconduct, sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to such incidents shall be reviewed and assigned for investigation by the IDOC Division of Investigative Services (DIS) Unit.

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states Deputy Director of Institution Operations/Designee shall determine when the evidence is sufficient for criminal prosecution and shall refer appropriate incidents to criminal authorities. All referrals shall be documented.

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states IDOC shall publish the sexual violence investigation policies on its website <https://doc.iowa.gov/prison-rape-elimination-act/iowa-doc-prea-policies>

115.22 (d) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states Deputy Director of Institution Operations/Designee shall determine when the evidence is sufficient for criminal prosecution and shall refer appropriate incidents to criminal authorities. All referrals shall be documented.

IDOC shall make best efforts to ensure that any other State entity responsible for conducting administrative or criminal investigations of sexual violence, sexual misconduct, or sexual harassment in IDOC facilities shall have in place a policy governing the conduct of such investigations.

115.22 (e) – The Auditor is not required to audit this provision.

The Auditor conducted an interview with an Investigator assigned to North Central CF and requested an overview of the investigative process and the documentation required in a case when an allegation of sexual violence or sexual harassment incident occurs within the facility.

The Facility Investigator explained when an allegation of sexual violence is received and after the initial response and protective steps are taken, an initial incident report is submitted by the institution to the IDOC Division of Investigative Services (DIS). The initial report is reviewed and approved by the supervisor of DIS, who then assigns the investigation to a Facility Investigator. The investigation is initiated promptly by the assigned Facility Investigator who has received training and education and has the legal authority to conduct such investigations.

The Facility Investigator also provided an overview of the investigative process, which includes reviewing the initial report of the allegation, conducting scene investigation, review of evidence collected, photographs, video footage, conduct a complete media summary review – including emails, messages, phone calls, conduct interviews with victim, staff, witnesses, and alleged perpetrator, and complete a summary report and finalize the investigation.

The Facility Investigator also provided an overview of the various documentation contained in each case file to include but not limited to the Field Incident Report, Notice of Investigation, statements – victim, witness, perpetrator, medical documentation, victim advocacy form, summaries of video and media review, investigative findings and summary, Closure Letter(s) – victim, witness, perpetrator, Retaliation Tracking, and Sexual Violence Incident Review.

	The Auditor reviewed four sexual abuse and/or sexual harassment investigation files. The Auditor reviewed each investigation thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required. Each file reviewed by the Auditor contained all the appropriate documentation, and each incident was investigated promptly, thoroughly, and objectively by a qualified investigator who has the training and the authority to conduct such investigations. Each file contained documentation to include but not limited to the initial incident reports – summary of the allegation, demographics of involved staff or incarcerated individual(s) to include relevant history and current sentence, medical documentation and notes, photos of incarcerated individual victim and alleged aggressor, advocacy acceptance or refusal, victim, witness, and alleged aggressor statements, review of communications – emails, messages, and phone calls, review of video surveillance, investigative summary, investigative findings, notification of case disposition to incarcerated individual, sexual violence incident reviews, and monitoring for retaliation forms. Upon review of the policies, documentation, and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.31	Employee training
	Auditor Overall Determination: Exceeds Standard Auditor Discussion Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-TS-04, Administration & Management, Orientation & New Employee Training</i> Iowa Department of Corrections Policy <i>AD-TS-05, Administration & Management, Training & Staff Development</i> Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections PREA Training Curriculum & eLearning Iowa Department of Corrections North Central CF Training Completion Documentation

(iadocLearn)

Interviews conducted with:

Random Staff

Site Review Observations:

PREA Informational Posters

Findings (By Provision):

115.31 (a) – Iowa Department of Corrections Policy *AD-TS-04, Administration & Management, Orientation & New Employee Training* and Policy *AD-TS-05, Administration & Management, Training & Staff Development* states all employees who may have contact with incarcerated individuals shall be trained on the IDOC’s zero-tolerance policy for sexual violence and sexual harassment and how to fulfill their responsibilities under IDOC sexual violence and sexual harassment prevention, detection, reporting and response policies and procedures.

Iowa Department of Corrections Policy *AD-TS-04, Administration & Management, Orientation & New Employee Training* states the institution shall train all employees who have contact with incarcerated individuals on:

- IDOC’s zero tolerance for sexual violence and sexual harassment;
- How to fulfill responsibilities under the sexual violence and sexual harassment prevention, detection, reporting, and response policies and procedures;
- Incarcerated individuals’ rights to be free from sexual violence and sexual harassment;
- The right of incarcerated individuals & employees to be free from retaliation for reporting sexual violence and sexual harassment;
- The dynamics of sexual violence and sexual harassment in confinement;
- The common reactions of sexual violence and sexual harassment victims;
- How to detect and respond to signs of threatened & actual sexual violence;
- How to avoid inappropriate relationships with incarcerated individuals;
- How to communicate effectively & professionally with incarcerated individuals, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming incarcerated individuals;

115.31 (b) – Iowa Department of Corrections Policy *AD-TS-05, Administration & Management, Training & Staff Development* states such training shall be tailored to the gender of the incarcerated individuals at the employee’s facility. The employee shall receive additional training if the employee is reassigned from an institution that houses only male incarcerated individuals to an institution that houses only female incarcerated individuals, or vice versa.

115.31 (c) – Iowa Department of Corrections Policy *AD-TS-05, Administration & Management, Training & Staff Development* states IDOC shall provide each employee with refresher training every two years to ensure that all employees know the agency’s current sexual violence and sexual harassment policies and procedures.

115.31 (d) – Iowa Department of Corrections Policy *AD-TS-05, Administration & Management, Training & Staff Development* states IDOC shall document through employee signature or electronic verification, that employees understand the training they received.

The Auditor reviewed the training curriculum and electronic verification that North Central CF staff training comprehension and attendance. The training curriculum outlined the staff member’s responsibilities in preventing, detecting, and response to incarcerated individual sexual violence and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with incarcerated individuals, understanding that incarcerated individuals have the right to be free from sexual violence and sexual harassment.

The Iowa Department of Corrections PREA training curriculum provided to the Auditor, includes an incarcerated individual’s right to be free from sexual violence and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce “opposite gender” correctional officers and supervision staff into an all-male or all-female housing facility and how to conduct cross-gender pat-down searches of incarcerated individuals in a professional and respectful manner consistent with security correctional environments.

The Auditor conducted random staff interviews, and each staff member articulated the agency's zero tolerance policy on sexual violence and sexual harassment, their role and responsibilities regarding sexual violence and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with incarcerated individuals, and an incarcerated individual right to be free from sexual violence and sexual harassment. All staff members acknowledged

	receiving the training every year during his/her In-service training. Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>AD-TS-04, Administration & Management, Orientation & New Employee Training</i> Iowa Department of Corrections Policy <i>AD-CI-01, Administration & Management, Citizen Involvement & Volunteers</i> Iowa Department of Corrections Volunteer & Community Partners Training Curriculum Iowa Department of Corrections North Central CF Volunteer & Community Partners Training Tracking Interviews conducted with: Volunteer or Community Partners (Contractors) who have contact with Incarcerated individuals Findings (By Provision): 115.32 (a) – Iowa Department of Corrections Policy <i>AD-TS-04, Administration & Management, Orientation & New Employee Training</i> states all employees who may have contact with incarcerated individuals shall be trained on the IDOC’s zero-tolerance policy for sexual violence and sexual harassment and how to fulfill their responsibilities under IDOC sexual violence and sexual harassment prevention, detection, reporting and response policies and procedures.

	Iowa Department of Corrections Policy <i>AD-CI-01, Administration & Management, Citizen Involvement & Volunteers</i> states all community partners and volunteers shall be trained regarding the IDOCs zero tolerance policy regarding sexual violence and harassment. 115.32 (b) – Iowa Department of Corrections Policy <i>AD-CI-01, Administration & Management, Citizen Involvement & Volunteers</i> states an orientation/training session shall be with community partners and volunteers appropriate for their functions and service they provide. 115.32 (c) – Iowa Department of Corrections Policy <i>AD-CI-01, Administration & Management, Citizen Involvement & Volunteers</i> states training shall be completed and documented prior to initiation of the volunteer service. This may be completed electronically. The Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training was tailored based on the services they provide and the level of contact they have with incarcerated individuals and included the agency’s zero-tolerance policy regarding sexual violence and sexual harassment along with how to report such incidents. The Auditor conducted interviews with contract and volunteer staff members and each staff member confirmed and acknowledged their understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities. Upon review of the policy and documentation and after completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Incarcerated Individual Rules & Handbook (multiple languages)

Iowa Department of Corrections Acknowledgement of Receipt of PREA Orientation

Iowa Department of Corrections *Staying Safe: A Guide for Offender Conduct*

PREA / Sexual Awareness Brochures (multiple languages)

Interviews conducted with:

PREA Compliance Manager Intake Staff

Random Incarcerated individuals

Targeted Incarcerated individuals (Limited English Proficient, Hearing, Vision, Physical or Cognitive Impaired)

Site Review Observations:

Incarcerated individual files – Comprehensive PREA Education

PREA Informational Signage posted throughout facility

Findings (By Provision):

115.33 (a) –Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states all incarcerated individuals shall receive PREA orientation training within three days of admission to IDOC, including information on the IDOCs zero-tolerance policy regarding unwanted sexual behavior and how to report incidents or suspicions of unwanted sexual behavior. All incarcerated individuals shall be given a copy of the handout, *Staying Safe: A Guide for Incarcerated Individual Conduct*.

115.33 (b) – Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states within 30 days of intake, IDOC shall provide comprehensive education to incarcerated individuals either in person or through video regarding their rights to be free from unwanted sexual behavior and to be free from retaliation for reporting such incidents and regarding IDOC policies and procedures for responding to such incidents.

115.33 (c) – The North Central CF PAQ states that of those who were not educated during 30 days of intake, all incarcerated individuals have been subsequently educated. Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states upon transfer to a different institution, incarcerated individuals shall receive training within the first seven days concerning how the policies and procedures of the incarcerated individual’s new institution differ from those of the previous institution. Replacement copies of the handout, *Staying Safe: A Guide for Incarcerated Individual Conduct*, shall be provided as needed.

The Auditor reviewed the comprehensive PREA educational video transcript, provided in multiple languages, which is given to all IDOC incarcerated individuals within seven days of arriving at a permanent facility. The facilities utilize the PREA Resource Center’s educational video titled *PREA Adult Comprehensive – Captioned English*. The facility also provides a version of the video in Spanish for LEP incarcerated individuals.

The Auditor reviewed documentation from the twelve-month auditing period showing incarcerated individuals received into the facility were provided with comprehensive PREA education. The comprehensive documentation included rosters with incarcerated individual signatures and acknowledgment of understanding. The facility maintains documentation of incarcerated individual participation in Iowa Correctional Offender Network (ICON).

The Auditor requested an up-to-date facility Incarcerated Individual roster. The facility incarcerated individual roster provides a list of all incarcerated individuals currently at the facility and is organized by housing facility, provides incarcerated individual characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process.

All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-two incarcerated individual interviews and inquired if each incarcerated individual had received PREA education upon arrival at the facility. All twenty-two incarcerated individuals interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All incarcerated individuals interviewed acknowledged the zero-tolerance policy on sexual violence sexual harassment and the various ways to report such incidents.

Incarcerated individuals referred to utilizing multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. Eighteen of the twenty-two incarcerated individuals interviewed referred to notifying a staff member, unit manager, counselor, or family member as the most direct method to report or inquire about PREA information. Twenty-one of the twenty-two incarcerated individuals interviewed also referred to calling a family member or friend as their source outside the facility and twenty-one of the twenty-two incarcerated individuals interviewed confirmed their knowledge of third-party reporting. Nineteen of the twenty-two incarcerated individuals interviewed were aware of the availability of submitting an anonymous PREA report.

115.33 (d) – Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states IDOC shall provide incarcerated individual education in formats accessible to all incarcerated individuals, including those who are Limited English Proficient (LEP), deaf, visually impaired, or otherwise disabled, as well as to incarcerated individuals who have limited reading skills. Resources for incarcerated individuals with hearing impairment (closed captioning), vision impairment (large print material or reading of material to incarcerated individual by staff), or translation for LEP incarcerated individuals (language line services).

The Auditor interviewed targeted incarcerated individuals with either a physical, hearing, vision, or cognitive impairment or who were Limited English Proficient. Each incarcerated individual acknowledged receiving PREA information during the intake / transfer process. Each incarcerated individual described receiving the comprehensive PREA orientation within the first few days after arriving at the facility. Additionally, each incarcerated individual acknowledged the information was provided to him in an accessible format specific to his individual needs. For the targeted interviews with an LEP incarcerated individual, the Auditor utilized a certified interpreter for translation services.

115.33 (e) – Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states IDOC shall maintain documentation of incarcerated individual

	participation in these education sessions either by generic note or the signed copy of Form 1 scanned into Iowa Correctional Offender Network (ICON) incarcerated individual attachments. 115.33 (f) – Iowa Department of Corrections Policy <i>PREA-01, Prison Rape Elimination Act (PREA)</i> states in addition to providing such education, IDOC shall ensure that key information is continuously and readily available or visible to incarcerated individuals through posters, bulletin boards, or other written formats. The Auditor conducted a tour of the facility and observed PREA informational bulletins. These PREA bulletins are posted in multiple languages, located inside every housing unit, as well as several informational bulletins were posted in common areas (educational and vocational buildings) throughout the facility. The bulletins display phone numbers and addresses, advocacy services and the PREA Coordinator and are displayed in multiple languages. The Auditor conducted an interview with the PREA Compliance Manager and discussed the incarcerated individual comprehensive PREA orientation and documentation process. The PREA Compliance Manager provided specific details on the process of educating incarcerated individuals including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process through PREA informational pamphlets, <i>No Means No</i> signage, <i>Stay Safe Guide</i>, and the signage posted throughout the facility. Upon review of the policy and documentation listed above and previously discussed, in addition to the observations made throughout the on-site tour, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

National Institute of Corrections (NIC) Specialized Training Curriculum & Training Certificates

Interviews conducted with:

Investigative Staff

Site Review Observations:

Training documentation / file review

Findings (By Provision):

115.34 (a) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states in addition to the general training provided to all employees, the Deputy Director of Institution Operations shall ensure that, to the extent IDOC conducts sexual violence investigations, its sexual violence investigators have received specialized training in conducting such investigations in confinement settings.

115.34 (b) – Iowa Department of Corrections *PREA-03, Prison Rape Elimination Act (PREA)* states specialized training shall include techniques for interviewing sexual abuse victims, *Miranda* and *Garrity* warnings, the impact of the Peace Officer’s Bill of Rights, sexual abuse evidence collection in confinement settings, characteristics and behavior indicators of sexual violence perpetrators and victims in correctional settings, credibility assessments, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

115.34 (c) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states the Deputy Director of Institution Operations shall maintain documentation that sexual violence investigators have completed the required specialized training in conducting such investigations.

The Auditor reviewed training records, which included the specialized training curriculum National Institute of Corrections (NIC), *PREA: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying facility

	investigative staff that conduct sexual violence investigations attended and completed the required specialized training. The Auditor interviewed a Facility Investigator who confirmed attending and successful completion of the required specialized training. The Facility Investigator clearly articulated the comprehensive training received which included investigating sexual harassment allegations, investigating sexual violence allegations, understanding the impact of victim trauma, techniques for interviewing sexual violence victims, preservation of crime scene and evidence collection, proper use of <i>Miranda</i> and <i>Garrity</i> and the importance of each, and criteria required for administrative action and prosecution referrals. Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews, in addition to the observations made throughout the on-site visit, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> Iowa Department of Corrections Medical & Mental Health Training Curriculum Iowa Department of Corrections Training Roster w/signatures (Medical / Mental Health Staff) Interviews conducted with: Medical / Mental Health Staff Site Observation:

Medical Staff Training Records

Findings (By Provision):

115.35 (a) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states each institution shall ensure that all full- and part-time medical and mental health care staff who work regularly in its facilities have been trained in:

- How to detect and assess signs of sexual violence;
- How to preserve physical evidence of sexual violence;
- How to respond effectively and professionally to victims of sexual violence; and
- How and who to report allegations or suspicions of sexual violence.

115.35 (b) – This provision of the standard is not applicable. North Central CF medical staff do not conduct forensic medical exams; forensic examinations are conducted at the local hospital.

115.35 (c) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states the institution shall maintain documentation that medical and mental health practitioners have received the training reference in this standard either from the agency or elsewhere.

115.35 (d) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states medical and mental health care practitioners shall also receive the training mandated for all employees, depending on the practitioner's status at the agency.

Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states medical and mental health care practitioners shall also receive training on how to comply with relevant laws related to mandatory reporting of sexual violence to outside authorities.

The Auditor reviewed the training records of medical and mental health staff currently

	assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required elements of the agency policy and of the PREA standard. The Auditor conducted interviews with Medical & Mental Health Practitioners and confirmed receipt of specialized training on how to preserve physical evidence of sexual violence, how to respond effectively and professionally to victims of sexual violence and sexual harassment, and how to report allegations of sexual violence and sexual harassment. Medical and Mental Health Practitioners also confirmed receiving the agency's general PREA training, which included the zero tolerance to sexual violence and sexual harassment. Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IS-RO-01, Institutional Services, Reception & Orientation</i> Iowa Department of Corrections Policy <i>IS-RO-02, Institutional Services, Reception & Orientation</i> Iowa Department of Corrections <i>Sexual Violence Propensity (SVP) - Intake Screening Tool</i> Interviews conducted with: Incarcerated individuals who disclosed prior SV at Intake Random Incarcerated individuals Staff Responsible for Risk Screening

PREA Compliance Manager

PREA Coordinator

Site Review Observations:

IDOC SVP – Intake Screening Tool

IDOC SVP Scoring Guide

Findings (By Provision):

115.41 (a, d-e) – Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states all incarcerated individuals shall be assessed immediately upon arrival using the paper *IDOC SVP – Intake Screening Tool* and shall be assessed during an intake screening for their risk of being sexually abused by other incarcerated individuals or sexually abusive toward other incarcerated individuals. This tool is confidential for staff use only and shall not be self-administered by the incarcerated individual and shall only be administered by the intake staff.

Iowa Department of Corrections *SVP – Intake Screening Tool* is divided into two sections, *Sexual Victimization Potential* and *Sexual Violence Potential* and includes the following criteria to assess incarcerated individuals for risk of sexual victimization potential or sexual violence potential:

- *Risk of Victimization:*
 - *Physical build of incarcerated individual;*
 - *Unassertive, projects weakness or expresses concern regarding physical or sexual victimization while in prison;*
 - *Age less than 25 or over 65;*
 - *Vulnerable to victimization due to nature of crime (hate crime, sexual assault against child, high profile crime);*
 - *Lives an alternative lifestyle (gay, lesbian, bisexual, transgender, intersex, fluid, or gender non-conforming);*
 - *Prior sexual victimization as a child or adult;*
 - *Prior incarcerations;*
 - *Presents as having a mental, physical, or developmental disability;*
 - *History of physical or sexual victimization in prison or the community;*
 - *Incarcerated individual’s own perception of vulnerability.*

- *Risk of Abusiveness:*
 - *Prior incarcerations;*
 - *Displays intimidating or aggressive attitude;*
 - *Appears prison-wise, highly familiar with prison environment;*
 - *Is confirmed or suspected STG;*
 - *Has history of criminal charges and/or convictions for sexual related offenses against an adult or child;*
 - *Whether criminal history is exclusively nonviolent;*
 - *Has prior reports for sexual misconduct, sexual assaults on incarcerated individuals, or assaults on incarcerated individuals or ever been a perpetrator of prior sexual abuse;*
 - *Required to register as a sex offender or convicted of a sex offense.*

Each question has a designated value and when totaled, each section of the risk screening will yield a Sexual Violence Propensity Assessment Code. The SVP Assessment Code will then determine if the incarcerated individual is at a low risk, at risk of victimization, or at risk of abusiveness.

115.41 (b) – North Central CF reported in the PAQ the number of incarcerated individuals entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other incarcerated individuals with 72 hours of their entry into the facility was 549, 100% of incarcerated individuals.

The Auditor requested an up-to-date incarcerated individual roster, which provides a list of all incarcerated individuals currently at the facility and is organized by housing facility, provides incarcerated individual characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process. All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

Nine of the twenty-two incarcerated individuals interviewed arrived at the facility twelve months or longer, therefore this interview question was not posed to them. Of the remaining thirteen incarcerated individuals interviewed, eleven incarcerated individuals recalled the initial risk assessment interview, and each incarcerated individuals confirmed receiving the second risk assessment interview occurring within

a few weeks after the initial assessment.

115.41 (c) – North Central CF PAQ states the facility conducts risk assessments by using an objective screening instrument. Risk screenings are completed using the *IDOC SVP – Intake Screening Tool* in the Iowa Correctional Offender Network (ICON) data collection system.

The Auditor conducted an interview with the PREA Compliance Manager regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The PREA Compliance Manager provided the Auditor with a complete overview of the incarcerated individual classification process and the incarcerated individual risk screening process to include how all incarcerated individuals are screened within 72 hours (or less) of their arrival at the facility. The PREA Compliance Manager also confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities.

115.41 (f) – Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states within a set time not to exceed 30 days from the incarcerated individual's arrival at an institution, the institution shall reassess the incarcerated individual's SVP code based on any additional, relevant information received by the institution since the most recent SVP assessment.

The Auditor reviewed thirty-eight *IDOC SVP – Intake Screening Tool* forms completed during the auditing period. The initial risk assessments and reassessments reviewed included incarcerated individuals from the random and targeted interviews and incarcerated individuals that risk assessment warranted a referral or reassessment. All forms were filled out accurately and completely and in accordance with agency policy.

The Auditor conducted interviews with incarcerated individuals who disclosed prior sexual victimization during intake. All three incarcerated individuals confirmed to the Auditor that each were offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process. One of the three incarcerated individuals interviewed accepted the opportunity to meet with mental health staff. The incarcerated individual confirmed meeting with mental health practitioner within a couple of days to a week.

115.41 (g) – Iowa Department of Corrections Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states an incarcerated individual's risk level shall be reassessed when warranted due to significant events, a referral, request, incident of sexual assault or sexual abuse, or receipt of additional information that bears on the incarcerated individual's SVP code.

115.41 (h) – Iowa Department of Corrections Policy *IS-RO-02, Institutional Services, Reception & Orientation* states incarcerated individuals may not be disciplined for refusing to answer questions or not disclosing complete information.

The Auditor inquired to the PREA Compliance Manager what actions are taken against incarcerated individuals who refuse to cooperate or answer questions in the risk screening process. The PREA Compliance Manager responded that incarcerated individuals are not required to provide answers, if an incarcerated individual refuses to answer, another staff member will conduct a follow-up interview. The PREA Compliance Manager confirmed that incarcerated individuals are not disciplined for refusing to cooperate or answer the questions in the risk screening process.

115.41 (i) – Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states IDOC shall implement appropriate controls on the dissemination of responses to questions asked pursuant to risk screenings in order to ensure that sensitive information is not exploited to the incarcerated individual's detriment by staff or other incarcerated individuals.

The Auditor inquired to the PREA Compliance Manager how the facility protects such sensitive information. The PREA Compliance Manager confirmed access to such information is strictly limited and any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to Medical and Mental Health Practitioners and other staff, as necessary, to assist with making treatment plans and informed management decisions (housing, bed, work, education, and program assignments).

The Auditor inquired to the PREA Coordinator on how the facility protects sensitive information, in particular an incarcerated individual's risk assessment. The PREA Coordinator explained how the risk assessments are maintained electronically, in a secure program, and the PREA Compliance Manager, PREA Compliance Manager Assistant, Facility Investigators, and Medical and Mental Health Practitioners have access to risk assessment information.

	Upon review of the policies, on-site file, and documentation review, and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IS-RO-01, Institutional Services, Reception & Orientation</i> Iowa Department of Corrections Policy <i>IS-RO-02, Institutional Services, Reception & Orientation</i> Iowa Department of Corrections <i>Sexual Violence Propensity (SVP) - Intake Screening Tool</i> Interviews conducted with: PREA Compliance Manager PREA Coordinator Staff Responsible for Risk Screening Non-heterosexual inmates Site Observation: Incarcerated individual initial risk assessment & reassessment Findings (By Provision): 115.42 (a) – Iowa Department of Corrections Policy <i>IS-RO-02, Institutional Services, Reception & Orientation</i> states IDOC shall use information from the SVP Assessment

to evaluate housing, bed, work, education, and program assignments with the goal of providing staff supervision for incarcerated individuals at high risk of being sexually victimized from those at high risk of being sexually abusive.

115.42 (b) – Iowa Department of Corrections Policy *IS-RO-02, Institutional Services, Reception & Orientation* states IDOC shall make individualized determinations about how to ensure the safety of each incarcerated individual.

The Auditor conducted an interview with PREA Compliance Manager regarding the responsibility of conducting screenings for risk of victimization and abusiveness. The PREA Compliance Manager provided the Auditor with a complete overview of the incarcerated individual classification process and the incarcerated individual risk screening process to include how all incarcerated individuals are screened within 72 hours (or less) of their arrival at the facility. The PREA Compliance Manager explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each incarcerated individual, which is done strictly on a case-by-case basis.

The Auditor requested an up-to-date incarcerated individual roster for gay or bisexual incarcerated individuals to conducted targeted incarcerated individual interviews. All incarcerated individual interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Incarcerated individuals*.

The Auditor conducted interviews with incarcerated individuals who identified as gay or bisexual incarcerated individuals. The incarcerated individuals were questioned whether they were placed in a housing area only for gay or bisexual incarcerated individuals. Each incarcerated individual acknowledged being housed in a general population housing area for all incarcerated individuals of the same level of classification. Documentation reviewed by the Auditor indicated each incarcerated individual interviewed was housed according to their security custody level and in accordance with IDOC policy.

115.42 (c) – This provision is no longer applicable to a compliance finding.

115.42 (d) – This provision is no longer applicable to a compliance finding.

	115.42 (e) – This provision is no longer applicable to a compliance finding. 115.42 (f) – This provision is no longer applicable to a compliance finding. 115.42 (g) – This provision is no longer applicable to a compliance finding. Upon review of the policies and upon completion of the interviews, North Central CF demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> Interviews conducted with: Facility Warden Staff who supervise Incarcerated individuals in Segregated Housing Findings (By Provision): 115.43 (a) – Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> states incarcerated individuals at high risk for sexual victimization shall not be placed in involuntary PC housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the incarcerated individual in involuntary PC housing for less than 24 hours while

completing the assessment.

The Auditor conducted an interview with the Facility Warden regarding incarcerated individuals at high risk of victimization. The Facility Warden explained that incarcerated individuals who are at a high risk of sexual victimization are rarely placed in involuntary segregated housing as the facility has the available housing to ensure their safety. However, if this were to occur, the incarcerated individual would be placed in involuntary segregated housing until an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely violence.

The Facility Warden explained If the assessment cannot be completed immediately, the facility may hold the incarcerated individual in involuntary segregated housing while completing the assessment, for no longer than 24 hours. The Facility Warden reiterated that placing an incarcerated individual at a high risk of sexual victimization in involuntary segregated housing is a rare occurrence, the status of the incarcerated individual and/or the incident is reviewed as soon as possible, and the incarcerated individual will be released from segregation as soon as it can be determined that the incarcerated individual is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

115.43 (b) – Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states the Unit Team or other designated authority shall determine the programs and services available to incarcerated individuals placed in protective housing for this purpose both in terms of the operation of the living unit and individual restrictions. If the facility restricts access to programs, privileges, education, or work opportunities, all such restrictions, including the authorizing official, shall be logged into the Area Logbook. A record of the restriction shall be provided to the Associate Warden of Security or other person designated in institutional procedures and documented in ICON Generic Notes.

The Auditor conducted an interview with a Facility Staff Member who supervises incarcerated individuals in segregated housing. The Auditor inquired to the Facility Staff Member if an incarcerated individual is placed in segregated housing for protection from sexual violence or after having alleged sexual violence, what restrictions are placed on the incarcerated individual. The Facility Staff member articulated that incarcerated individuals who are at a high risk for sexual victimization or after alleging sexual violence are rarely placed in involuntary segregated housing. The Facility Staff Member explained that if this were to occur, the incarcerated individual placed in involuntary segregated housing does not have restrictions and retain the same privileges as incarcerated individuals in general population housing,

	to include participating in programs and education opportunities. The Facility Staff Member explained if an incarcerated individual has restrictions placed on him/her it would be a result of behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction. During the twelve-month auditing period, the facility reported in the PAQ there were no incarcerated individuals at risk of sexual victimization being assigned to involuntary segregated housing. The Auditor interviewed a Unit Supervisor and the PREA Compliance Manager and both confirmed the information previously provided by the facility in the PAQ. Therefore, incarcerated individuals in this targeted category were not interviewed. 115.43 (c) – Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> states every 30 days, the facility shall conduct a review to determine if there is a continuing need for separation of the incarcerated individual from the general population. 115.43 (d) – Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> states the Warden or Designee shall, within 72 hours, make a determination regarding the need for continued placement and conformity with policy and procedures, and document the review on the ICON Segregation Notice. 115.43 (e) – Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> states within seven days of placement, the Protection Custody Review Committee (PCRC) shall conduct a PC review to determine the need for continued placement in PC. The status of all incarcerated individuals placed in PC shall be reviewed every seven days for the first two months and every 30 days thereafter to determine whether the reasons for placement still exist. Upon review of the policy and documentation provided and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Incarcerated Individual Rules & Handbook (multiple languages)

Iowa Department of Corrections Acknowledgement of Receipt of PREA Orientation

Iowa Department of Corrections *Staying Safe: A Guide for Offender Conduct*

Iowa Department of Corrections PREA Zero Tolerance Poster (English/Spanish)

Interviews conducted with:

Random Incarcerated individuals

PREA Compliance Manager

Random Staff

Site Observations:

PREA informational signage – *No Means No*

Findings (By Provision):

115.51 (a) – Iowa Department of Corrections Policy *PREA-01, Prison Rape Elimination Act (PREA)* states incarcerated individual may report sexual abuse, sexual harassment, or sexual misconduct or retaliation for reporting such incidents to a staff member, send a kite or letter to the Institution Warden, send a letter Victim and Restorative Justice Director, or the Ombudsman.

115.51 (b) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states an incarcerated individual may report sexual violence and sexual harassment privately to the Iowa Ombudsman Office, Office of Citizens Aide/ Ombudsman (sending correspondence to Office of Ombudsman, Ola Babcock Miller

Building, 1112 East Grand, Des Moines, Iowa 50319).

115.51 (c) – The Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states any staff member who receives a report of sexual violence or retaliation, whether verbally or in writing from an incarcerated individual or anonymously or from third parties, shall immediately notify the Shift supervisor and complete an incident report.

115.51 (d) – The Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states each institution shall establish a method for staff to privately report sexual violence against incarcerated individuals. To include calling the Ombudsman at 1.888.426.6283 or sending them correspondence at Office of Ombudsman, Ola Babcock Miller Building, 1112 East Grand, Des Moines, Iowa 50319.

Iowa Department of Corrections *No Means No* informational poster provides direction on reporting sexual harassment or sexual violence and information on victim advocacy. The informational poster is in bright, vibrant colors. The information includes:

RIGHT TO REPORT

If you, or someone you know, are experiencing sexual abuse or sexual harassment, North Central Correctional Facility staff wants to know. We want you to report right away! Why?

- We want to keep YOU safe; it is our job! It is your right to be free from sexual abuse and sexual harassment.
- We want to conduct an investigation of the reported incident.
- We want to hold the perpetrator accountable for his/her actions.
- We want to provide YOU with relevant information and support services.

HOW TO REPORT

North Central Correctional Facility offers multiple ways to report sexual abuse and sexual harassment. Reports can be made anonymously.

- Send a kite/kiosk or letter to the Warden / Superintendent
- Report to any staff, volunteer, contractor, or medical or mental health staff.
- Submit a grievance or sick call slip.

- Report to the PREA Coordinator or PREA Compliance Manager
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling toll free 888.426.6283 to the Iowa DOC Ombudsman
- Reports can also be submitted to the Ombudsman, or by writing the Division of Investigative Services at 510 E. 12th St, Des Moines, IA 50319.
- You can also submit a report on someone's behalf, or someone at the facility can report for you using the ways listed here.

VICTIM SUPPORT SERVICES

North Central Correctional Facility has partnered with Centers Against Abuse & Sexual Assault to provide survivors of sexual abuse with emotional support services. To access these services, you can use the 24-hour Hope Line, 877.362.4612.

During the facility tour, the Auditor observed PREA Zero-tolerance, and the *No Means No* informational signage posted in all housing units, educational and program buildings, in the religious programs / services building, and incarcerated individual work areas. The PREA informational signage was posted in multiple languages.

The Auditor conducted informal interviews with incarcerated individuals in the housing units, various work assignments, and while touring the programs, educational, and vocational buildings. The Auditor inquired to each incarcerated individual on various PREA reporting methods available and each confirmed reporting to any staff member, submit a request, send an email on the Kiosk, or utilizing an outside reporting method – calling a family member or friend and request a report be submitted on their behalf.

The Auditor requested an up-to-date facility incarcerated individual roster, organized by housing facility, and provides incarcerated individual characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process. All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-two incarcerated individual interviews and inquired to

	each on the PREA reporting methods. Eighteen of the twenty-two incarcerated individuals interviewed referred to notifying a staff member, counselor, or family member as the most direct method to report or inquire about PREA information. Twenty-one of the twenty-two incarcerated individuals interviewed also referred to contacting a family member as their source outside the facility and twenty-one of the twenty-two incarcerated individuals interviewed confirmed knowledge of third-party reporting. Nineteen of the twenty-two incarcerated individuals interviewed were aware of the availability of submitting an anonymous PREA report. The Auditor-conducted interviews with random staff members and asked each staff member how an incarcerated individual can privately report sexual violence and sexual harassment or retaliation by other incarcerated individuals or staff for previously reporting sexual violence and sexual harassment. Each staff member interviewed was able to articulate the various methods an incarcerated individual may privately report an allegation of sexual violence or sexual harassment (family member, third party reporting, PREA Coordinator). Staff members also explained that reports concerning sexual violence or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately. The Auditor conducted an interview with the PREA Compliance Manager to verify reporting methods for sexual violence or sexual harassment allegations that are available for incarcerated individuals and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for incarcerated individuals and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the Office of Ombudsman is the designated outside entity for incarcerated individual reporting. Upon review of the policies, contracts, employee handbook, IDOC incarcerated individual handbook, and viewing of the PREA informational brochures and signs and upon completion of interviews conducted, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *IO-OR-06, Institutional Operations, Offender Rights*

Iowa Department of Corrections Incarcerated Individual Rules & Handbook

Interviews conducted with:

Incarcerated individuals who reported sexual violence

Site Observation:

Grievance and mailboxes located throughout the facility.

Findings (By Provision):

115.52 (a-g) – Iowa Department of Corrections Policy *IO-OR-06, Institutional Operations, Offender Rights* states allegations of incarcerated individual on incarcerated individual sexual abuse or sexual assault or staff, contractor, or volunteer sexual misconduct or sexual harassment, or retaliation are not processed as a grievance. However, if an incarcerated individual submits a complaint to the grievance officer, it will be sent to the Inspector General’s Office in Central Office for investigation. Incarcerated individuals may, at any time, seek assistance to their problems through the Office of Ombudsman.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired if the facility notified him of the final decisions made regarding the allegation and if such notification was in writing. The incarcerated individual confirmed to the Auditor he was notified by staff of the case disposition, both verbally and in writing. The Auditor verified the notifications while reviewing the investigative files and the offender notification contained the date, case disposition, and incarcerated individuals signature.

The Auditor reviewed the *Iowa Department of Corrections Incarcerated Individual*

	<i>Rules & Handbook</i> and confirmed the handbook contains information about the grievance process to include explanation of the two types of grievance, informal and formal. The handbook informs incarcerated individuals that additional and more detailed grievance information is covered during orientation. Upon review of policies, documentation, case files, and of the IDOC Incarcerated individual Handbook, and upon completion of interviews conducted during the on-site visit, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion Document Review: Iowa Department of Corrections Policy <i>PREA-01, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> IDOC, North Central Correctional Facility MOU w/ Centers Against Abuse & Sexual Assault Iowa Department of Corrections Incarcerated Individual Rules & Handbook (English/Spanish) Iowa Department of Corrections <i>Staying Safe: A Guide for Offender Conduct</i> Interviews conducted with: Random Incarcerated individuals Incarcerated individuals who reported sexual violence Site Review Observations: IDOC <i>No Means No</i> Informational Poster (English/Spanish) IDOC PREA Zero Tolerance Poster (English/Spanish)

Findings (By Provision):

115.53 (a) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the institution shall provide incarcerated individuals with access to outside victim advocates for emotional support services related to sexual violence by giving incarcerated individuals mailing addresses and telephone numbers. The institution shall enable reasonable communication between incarcerated individuals and these organizations and agencies, in as confidential a manner as possible.

115.53 (b) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the institution shall be inform incarcerated individuals prior to giving them access, of the extent to which such communications will be monitored and the extent of which reports of violence will be forwarded to authorities in accordance with mandatory reporting laws.

The Auditor requested an up-to-date incarcerated individual roster, organized by housing facility, which provides characteristics such as age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process. All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor inquired to each incarcerated individual interviewed, if needed, are there services available outside of the facility for dealing with sexual violence. Twenty of the twenty-two incarcerated individuals interviewed confirmed being provided such information in the North Central CF Incarcerated Individual Rules & Handbook during the comprehensive PREA orientation as well as the No Means No informational posters displayed throughout the facility. During the facility tour, the Auditor noted PREA Zero-Tolerance informational posters, and the No Means No informational posters displayed in all the above areas and buildings and while touring the programs and educational buildings.

115.53 (c) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the institution PREA Compliance Manager/PREA Coordinator shall enter into or attempt to enter into a memorandum of understanding or other agreement with community rape crisis service providers. Each institution shall

	maintain copies of agreements or documentation showing attempts to enter into such agreements. The Auditor reviewed the Iowa Department of Corrections Incarcerated Individual Orientation Handbook. The IDOC Incarcerated Individual Handbook provides information regarding victim advocacy services for incarcerated individuals and all information provided will be kept confidential, except information that requires mandatory reporting. In addition, the Auditor reviewed documentation which included the existing MOU between North Central Correctional Facility and the Centers Against Abuse & Sexual Assault. The contract uses clear and concise language, detailing the facilities responsibilities, the contractor's responsibilities, and the mutual responsibilities for each. The Auditor conducted an interview with an advocate from the Centers Against Abuse & Sexual Assault, and she confirmed the existing agreement, responsibilities within the agreement, and an overview of services provided to incarcerated individual victims of sexual assault. The services include safety planning and support services, accompaniment and support during forensic exams or investigatory interviews if requested and provide the victim with resources and information. The Auditor conducted targeted an interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired after reporting, did the facility allow him to contact anyone. The incarcerated individual confirmed to the Auditor, after reporting the incident, he was able to meet with a contracted Medical and Mental Health staff member and that Medical staff informed him of the additional victim advocacy services available from a Qualified Staff Member or the Centers Against Abuse & Sexual Assault. Documentation and investigative files reviewed by the Auditor confirmed that victim advocacy services were offered, and the incarcerated individual accepted the services from a Qualified Staff Member. Upon review of the policies and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.54	Third-party reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections *Staying Safe: A Guide for Incarcerated Individual Conduct*

Iowa Department of Corrections, North Central CF Incarcerated Individual Rules & Handbook (multiple languages)

IDOC *No Means No* Informational Poster (English/Spanish)

Iowa Department of Corrections Website <https://doc.iowa.gov/prison-rape-elimination-act>

Interviews conducted with:

Random Incarcerated individuals

Site Review Observation:

PREA informational signage

Findings (By Provision):

115.54 (a) – Iowa Department of Corrections *Staying Safe: A Guide for Incarcerated Individual Conduct* states incarcerated individuals may report incidents of sexual violence or sexual harassment by having a family member, friend, or by contacting the Ombudsman’s Office (Office of Citizens’ Aide/Ombudsman, Ola Babcock Miller Building, 1112 East Grand Des Moines, Iowa 50319).

Iowa Department of Corrections publishes agency policy regarding the referral of allegations of sexual violence or sexual harassment for criminal investigation on the agency website <https://doc.iowa.gov/prison-rape-elimination-act/iowa-doc-prea-policies> and provides directions on how to report sexual violence allegations on behalf of incarcerated individuals on the agency website <https://doc.iowa.gov/prison-rape-elimination-act/how-report-allegations-sexual-violence-idoc>

The Auditor requested an updated incarcerated individual roster, organized by housing unit, provides incarcerated individual characteristics such as age, gender,

race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, gang affiliation, and housing assignment. This allowed the Auditor to accurately select a random representation of incarcerated individuals for the interview process. All incarcerated individuals selected for interviews were selected under the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-two incarcerated individual interviews and inquired if each incarcerated individual had received PREA education upon arrival at the facility. All twenty-two incarcerated individuals interviewed recalled receiving both the initial PREA education and the comprehensive (video) orientation. All twenty-two incarcerated individuals interviewed acknowledged the zero-tolerance policy on sexual violence sexual harassment and the various ways to report such incidents.

When questioned about third party reporting, twenty-one of the twenty-two incarcerated individuals interviewed acknowledged how to submit a third-party report (ask a family member or friend to submit a report or contact the Ombudsman's Office). In addition, eighteen of the twenty-two incarcerated individuals referred to the *No Means No* informational posters throughout the facility, which contains directions on how to submit a third-party report.

The Auditor visited the agency's website and confirmed the availability for the public to submit a report of sexual violence or sexual harassment on behalf of an incarcerated individual. The report may also be submitted anonymously.

The IDOC website is an extremely user-friendly website to navigate, provides multiple IDOC informational links as well as links to additional PREA resources. These resources include, but are not limited to:

- Establishment of the Prison Rape Elimination Act (PREA) in 2003 (<https://doc.iowa.gov/prison-rape-elimination-act/about-prea>)
- Federal PREA Standards (<https://doc.iowa.gov/prison-rape-elimination-act/federal-prea-standards>)
- Iowa DOC Policy (<https://doc.iowa.gov/prison-rape-elimination-act/iowa-doc-prea-policies>)
- IDOC Facility PREA Audits (<https://doc.iowa.gov/prea-audits-legacy>)
- Annual IDOC PREA Report (<http://publications.iowa.gov/>)
- National PREA Resource Center (<https://doc.iowa.gov/prison-rape-elimination-act/federal-prea-standards>)

Upon review of the policies and upon completion of the interviews, North Central CF

	demonstrated facility- wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.
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115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-01, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> Interviews conducted with: Random Staff Medical / Mental Health Staff Facility Warden Site Observations: Staff reporting documentation of incarcerated individual information, incident reports and investigations being completed, and reports of allegations are addressed timely. Findings (By Provision): 115.61 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states all staff shall report immediately, any knowledge, suspicion, or information whether verbally or in writing regarding: • An incident of sexual abuse or sexual misconduct, or sexual harassment that

- occurred in a facility, where or not it is part of IDOC;
- Retaliation against incarcerated individuals or staff who reported an incident, and
- Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

115.61 (b) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states all sexual violence investigations are confidential under Iowa Code 904.602 and 201.5. Other than reporting to supervisors or the institution’s sexual violence investigator or PREA Compliance Manager/PREA Coordinator, staff shall not reveal any information related to a report to anyone other than to the extent necessary, as specified in IDOC policy, to make treatment, investigation, and other security or management decisions.

The Auditor conducted interviews with a random staff members, and each staff member interviewed articulated the agency's zero tolerance policy on sexual violence and sexual harassment, their role and responsibilities regarding sexual violence and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with incarcerated individuals, and an incarcerated individual right to be free from sexual violence and sexual harassment. Staff members also acknowledged that reports concerning sexual violence or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

115.61 (c) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/ Specialty Services* states medical and mental health care practitioners also receive training on how to comply with relevant laws related to mandatory reporting of sexual violence to outside authorities.

The Auditor conducted interviews with Medical and Mental Health Practitioners regarding responsibilities to disclose to incarcerated individuals the confidentiality limitations and reporting incidents of sexual violence or sexual harassment. Each Medical and Mental Health Practitioner articulated in detail step-by- step process when reporting incidents of sexual violence or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Practitioner acknowledged disclosing the confidentiality limitation prior to the initiation of services with any incarcerated individual. The Auditor inquired if any incarcerated individuals had reported an incident of sexual violence or harassment during the past twelve months and only the Mental Health Practitioner confirmed receiving such a report and immediately reported the allegation in

	accordance with agency policy. 115.61 (d) – Iowa Department of Corrections Policy <i>PREA-01, Prison Rape Elimination Act (PREA)</i> states if the alleged victim is under the age of 18 or considered a vulnerable adult under State or local law, the agency shall forward reports of unwanted sexual behavior to authorities in accordance with Iowa mandatory reporting laws. 115.61 (e) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states each institution shall immediately report all allegations of sexual violence, including third-party and anonymous reports, and allegations to the Deputy Director of Institution Operations/Designee and to the institution’s sexual violence investigator. The Auditor inquired to the Facility Warden are allegations of sexual violence and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Warden indicated all allegations of sexual violence and sexual harassment, no matter the origin of reporting, are reported directly to the designated facility investigators and the IDOC Division of Investigative Services (DIS). Upon review of the policies and upon completion of the interviews, North Central CF demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i>

Interviews conducted with:

Agency Head

Facility Warden

Random Staff

Findings (By Provision):

115.62 (a) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states all staff shall report immediately, any knowledge, suspicion, or information whether verbally or in writing regarding:

- An incident of sexual abuse or sexual misconduct, or sexual harassment that occurred in a facility, where or not it is part of IDOC;
- Retaliation against incarcerated individuals or staff who reported an incident, and
- Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states incarcerated individuals at high risk for sexual victimization shall not be placed in involuntary PC housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the incarcerated individual in involuntary PC housing for less than 24 hours while completing the assessment.

The facility reported in the PAQ there were three incarcerated individuals at substantial risk of imminent sexual abuse during the twelve-month auditing period. During the on-site, the Auditor interviewed the Facility Warden and the PREA Compliance Manager who confirmed the information initially entered in the PAQ, specifically provision §115.62 (a)-2 was entered in error. The information entered in the PAQ referred to all allegations of sexual abuse received during the twelve-month reporting period, therefore, for the purpose of this audit the correct number for provision §115.62 (a)-2 should be zero.

The Auditor conducted interviews with random staff members and inquired about his/

	her actions if they received information that an incarcerated individual was at imminent risk of sexual violence. Each staff member articulated the agency's response protocol to receiving such information and all staff members interviewed confirmed the priority is ensuring the safety of the incarcerated individual. Staff indicated they would safeguard the incarcerated individual and immediately notify their supervisor to investigate the threat to the incarcerated individual and to find safe housing for the incarcerated individual. The Auditor conducted an interview with the Facility Warden and inquired as to what action is taken upon learning an incarcerated individual is subject to a substantial risk of imminent sexual violence. The Facility Warden informed the Auditor that once a staff member receives information that an incarcerated individual may be at risk for sexual violence, that incarcerated individual is immediately safeguarded. The incarcerated individual victim's SVP Score is reviewed and updated, and Unit Staff determines proper housing which would ensure the incarcerated individual is protected from possible violence and/or retaliation. The Auditor conducted an interview with the Agency Head regarding what action is taken upon learning an incarcerated individual is subject to a substantial risk of imminent sexual violence. The Agency Head stated that the incarcerated individual is removed from any immediate threat they identify, the imminent risk, perception of the threat by the incarcerated individual, and other information is reviewed to determine the course of action. An investigation is conducted if the information provided or observed warrant an investigation. Additionally, the Agency Head stated programming and access to mental health resources is made available if the perceived risk by the incarcerated individual is due to prior victimization. Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

Interviews conducted with:

Agency Head

Facility Warden

Findings (By Provision):

115.63 (a) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states upon receiving an allegation that an incarcerated individual was sexually abused while confined at another facility, the Warden shall immediately notify the Deputy Director of Institution Operations/Designee. The Deputy Director of Institution Operations/Designee shall notify the facility or appropriate office of the agency where the alleged abuse occurred.

115.63 (b) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation. The Deputy Director of Institution Operations/Designee shall document that such notification has been provided.

115.63 (c) – In the twelve months prior to the audit, North Central CF reported receiving two allegations of sexual violence from a North Central CF incarcerated individual alleging sexual abuse while confined at another facility. The Auditor reviewed the Warden-to-Warden notifications and the completed investigations for each allegation, verifying the facility’s response in accordance with agency policy.

115.63 (d) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states the Deputy Director of Institution Operations/Designee shall ensure that the allegation is investigated in accordance with the requirements of the PREA standards. In the twelve months prior to the audit, North Central CF reported receiving no allegations of sexual abuse from another facility.

The Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual violence or sexual harassment occurred at the facility. The

	Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notifications would be made to the Division of Investigative Services (DIS), PREA Coordinator, and the PREA Compliance Manager for investigation. The Auditor conducted an interview with the Agency Head and inquired if another agency or facility refers an allegation of sexual violence that occurred within one of your facilities if there is a designated point of contact. The Agency Head explained that the point of contact for all sexual violence related incidents is the Supervisor of the Division of Investigative Services (DIS)/PREA Coordinator. Upon review of the policy, documentation, and investigative files, and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Security Staff / Non-Security Staff First Responders Random Staff Incarcerated individuals who reported sexual violence Findings (By Provision): 115.64 (a) – Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> states the first security staff on the scene of an incident of sexual abuse/

assault shall:

- Separate the alleged victim and perpetrator;
- Preserve and protect the crime scene, until appropriate steps can be taken to collect evidence;
- If it is alleged that a sexual abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and perpetrator not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

The Auditor conducted random and targeted staff interviews regarding his/her role as a First Responder to an allegation of sexual violence. Each Staff Member interviewed provided specific details of his/her responsibilities as a First Responder to include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health Practitioners and an immediate Supervisor.

In addition, each Staff Member acknowledged the importance of the agency's response protocol to a sexual violence allegation as well as his or her role as a First Responder. Each Staff Member interviewed articulated in detail the responsibilities of a First Responder and the importance of his/her responsibility when responding to an incident of sexual violence or sexual harassment as well as the importance of ensuring the victim is safe.

115.64 (b) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states if the first responder is not a security staff member, after ensuring that the alleged victim is free from harm, the staff member shall advise the alleged victim not to take any action that could destroy physical evidence. The non-security staff member shall notify Security of the situation immediately.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired, after reporting the incident, how did the facility respond and what did staff do when they first arrived at the scene. The incarcerated individual confirmed to the Auditor that upon notifying staff of the allegation, staff members responded immediately, taking the allegation seriously, moving him to a safe, secure location, interviewed (took statement) by a shift supervisor, and escorted him to medical for treatment and evaluation.

	Upon review of the policy, documentation, and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections, <i>North Central CF Sexual Assault Response Plan</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Facility Warden Findings (By Provision): 115.65 (a) – Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> outlines the facility’s written plan to coordinate actions taken in response to an allegation that an incarcerated individual was sexually assaulted. Any staff member who receives a report of sexual violence or retaliation, whether verbally or in writing from an incarcerated individual or anonymously or from third parties, shall immediately notify the Shift Supervisor. Iowa Department of Corrections <i>North Central CF Sexual Assault Response Plan</i> states upon learning of an allegation that an incarcerated individual was sexually abused, the first correctional officers to responding to the report shall: • Separate the alleged victim and perpetrator. • Preserve and protect the crime scene, where abuse occurred, for the PREA Investigator to take appropriate steps to collect any evidence. • Notify a supervisor.

	• If the abuse or assault occurred within 72 hours: request victim does not take any action that could destroy physical evidence. This would include washing, brushing teeth, changing clothes, urinating, defecating, eating or drinking. Ensure same for perpetrator. • If the abuse occurred within 24 hours: secure scenes/area for the investigator. This means the area is closed off to staff and offenders. ◦ Only Investigators and personnel from DIS will be allowed to enter the area. ◦ The scene/area will remain secure until released by investigator or DIS. • When appropriate, before the end of shift, document your observations in an incident report and forward it to investigators. • All physical evidence shall be immediately secured a chain of custody initiated. The Auditor established, from a thorough review of IDOC policy, that investigators assigned to the Division of Investigative Services (DIS) follow the United States Department of Justice, <i>A National Protocol for Sexual Assault Medical Forensic Examinations</i> a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions. During the pre-on-site phase of the audit, the Auditor reviewed <i>North Central CF Sexual Assault Response Plan</i>. The plan is detailed, provides systematic instructions, and outlines the roles and responsibilities for all staff responding to an incident of sexual violence. The Auditor conducted an interview with the Facility Warden and inquired to the implementation of the <i>North Central CF Sexual Assault Response Plan</i>. The Facility Warden provided a detailed description of the response plan and each staff member's responsibility when responding to an allegation of sexual violence. Upon review of the policies and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard

	Auditor Discussion Document Review: North Central CF PAQ Collective Bargaining Agreement, State of Iowa and the American Federation of State, County, and Municipal Employees, Council 61 AFL-CIO Interviews conducted with: Agency Head Findings (By Provision): 115.66 (a) – Iowa Department of Corrections has a collective bargaining agreement between the State of Iowa and the American Federation of State, County, and Municipal Employees, Council 61 AFL-CIO. A review of the collective bargaining agreement confirmed it is specific to employee wages/salaries. The collective bargaining agreement does not limit the agency’s ability to remove alleged staff sexual abusers from contact with any incarcerated individual pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Iowa Department of Corrections has not entered into any agreements that would limit the Department’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. The Auditor’s interview with the Agency Head Designee confirmed that IDOC policy precludes entering into a contract or agreement that prohibits such removal. All agreements contain language that permits the removal of an alleged staff sexual abuser during an investigation. Upon review of the policies and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.67	Agency protection against retaliation
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Designated Member Charged with Monitoring Retaliation Incarcerated individuals who reported sexual violence Facility Warden Agency Head On Site Observation: Investigation file review Findings (By Provision): 115.67 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states the institution shall protect all incarcerated individuals and staff who report sexual violence or who cooperate with investigations from retaliation by other incarcerated individuals or staff and shall designate which staff members or institution departments are charged with monitoring retaliation. Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> states staff shall not retaliate upon knowledge of sexual violence or precursor behavior allegations. 115.67 (b) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states the institution shall employ multiple protection measures, such as housing changes or transfers for incarcerated individual victims or perpetrators,

removal of alleged staff aggressors or incarcerated individual perpetrators from contact with victims, and emotional support services for incarcerated individuals or staff who fear retaliation for reporting for cooperating with investigations.

115.67 (c) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states for at least 90 days, following a report of sexual violence, the institution shall monitor the conduct and treatment of incarcerated individuals or staff who reported the sexual violence and of incarcerated individuals who were reported to have suffered sexual violence to see if there are changes that may suggest possible retaliation by incarcerated individuals or staff, and shall act promptly to remedy any such retaliation.

115.67 (d) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states in the case of incarcerated individuals, such monitoring shall also include periodic status checks.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired if he feels protected against possible revenge from staff or inmates for reporting an incident of sexual abuse. The incarcerated individual acknowledged feeling safe within the facility and if there was a need or concern, he would report to a staff member.

115.67 (e) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states if any other individual who cooperates with an investigation expresses a fear of retaliation, the institution shall take appropriate measures to protect that individual against retaliation.

During the twelve months prior to the audit, the North Central CF PAQ reflected there were no allegations of retaliation reported. During interviews with the Facility Warden and the PREA Compliance Manager the Auditor confirmed there were no allegations of retaliation received during the twelve-month auditing period. Therefore, offenders in this targeted category were not interviewed.

The Auditor conducted an interview with the Facility Staff Member designated with monitoring retaliation. The Staff Member articulated that to prevent retaliation against incarcerated individuals who report sexual violence or harassment or those who cooperate with an investigation, the Staff Member would monitor those individuals for at least 90 days. The Staff Member reviews disciplinary reports,

incarcerated individual housing or transfers, as well as monitor any changes in the incarcerated individual's behavior (withdrawn) or demeanor. If a concern that potential retaliation might occur beyond the 90 days, the Staff Member would continue to monitor conduct and treatment until the issue or threat is resolved.

The Auditor conducted an interview with the Facility Warden and inquired on the different measures taken to protect incarcerated individuals and staff from retaliation for reporting allegations of sexual violence or sexual harassment. The Facility Warden confirmed the facility would take all necessary steps to protect any person who reports sexual violence / harassment incident from retaliation. The Facility Warden explained that housing changes or transfers of incarcerated individuals, disciplinary action against staff members – including possible dismissal – or other means of removal of those who retaliate against someone who reports an allegation.

The Auditor conducted an interview with the Agency Head and inquired how the agency protects incarcerated individuals or staff from retaliation for sexual violence or sexual harassment allegations. The Agency Head explained the IDOC enforces a zero-tolerance policy regarding retaliation. The district and institution PREA Compliance Managers monitor staff and inmates involved in investigations for retaliation and investigate any/all report of retaliation. The Agency Head also explained that staff members might be provided with the ability to change posts or facilities to protect them from retaliation. They are also monitored for retaliation for at least 90 days following a report of sexual violence or sexual harassment.

The Agency Head explained that incarcerated individuals are educated on retaliation and methods to report retaliation, including reporting retaliation to a third-party/non-agency entity (Office of the Ombudsman). The PREA Compliance Manager monitors for retaliation, and all allegations of retaliation are fully investigated with corrective action used in substantiated cases.

The Auditor inquired to the Agency Head if an individual cooperates with an investigation expresses a fear of retaliation, what measures the agency takes to protect that individual against retaliation. The Agency Head explained the same process previously described is utilized. If the individual is an incarcerated individual, he may be afforded a housing change or transfer to another facility. That incarcerated individual will also be subject to 90-day monitoring. If the individual is a staff member, they may be provided with the opportunity to change posts or institutions and will be subject to 90-day monitoring.

Upon review of the policy, investigative files, and upon completion of the interviews,

	North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IO-HO-05, Institutional Operations, Short-Term Restrictive Housing (STRH)</i> Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> Interviews conducted with: Facility Warden Staff who supervise incarcerated individuals in Segregated Housing Findings (By Provision): 115.68 (a) – Iowa Department of Corrections Policy <i>IO-HO-05, Institutional Operations, Short-Term Restrictive Housing (STRH)</i> states any use of restrictive housing to protect an incarcerated individual who is alleged to have suffered sexual abuse shall be subject to the requirements of § 115.43. Iowa Department of Corrections Policy <i>IO-HO-06, Institutional Operations, Housing Operations</i> states incarcerated individuals at high risk for sexual victimization shall not be placed in involuntary PC housing unless an assessment of all available alternatives has been made, and a determination has been made that there are no available alternative means of separation from likely abusers. If the facility cannot conduct such an assessment immediately, the facility may hold the incarcerated individual in involuntary PC housing for less than 24 hours while completing the assessment.

Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states the Warden or Designee shall, within 72 hours, make a determination regarding the need for continued placement and conformity with policy and procedures, and document the review on the ICON Segregation Notice.

Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states every 30 days, the facility shall conduct a review to determine if there is a continuing need for separation of the incarcerated individual from the general population.

Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states within seven days of placement, the Protection Custody Review Committee (PCRC) shall conduct a PC review to determine the need for continued placement in PC. The status of all incarcerated individuals placed in PC shall be reviewed every seven days for the first two months and every 30 days thereafter to determine whether the reasons for placement still exist.

Iowa Department of Corrections Policy *IO-HO-06, Institutional Operations, Housing Operations* states the Unit Team or other designated authority shall determine the programs and services available to incarcerated individuals placed in protective housing for this purpose both in terms of the operation of the living unit and individual restrictions. If the facility restricts access to programs, privileges, education, or work opportunities, all such restrictions, including the authorizing official, shall be logged into the Area Logbook. A record of the restriction shall be provided to the Associate Warden of Security or other person designated in institutional procedures and documented in ICON Generic Notes.

The Auditor conducted an interview with a Facility Staff Member who supervises incarcerated individuals in segregated housing. The Auditor inquired to the Facility Staff Member if an incarcerated individual is placed in segregated housing for protection from sexual violence or after having alleged sexual violence, what restrictions are placed on the incarcerated individual. The Facility Staff Member articulated those incarcerated individuals placed in Protective Custody (placed in segregated housing for protection) do not have restrictions and retain the same privileges as incarcerated individuals in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an incarcerated individual has restrictions placed on him/her it would be a result of behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted,

	duration of restriction, and reasons for initiating the restriction. According to the information provided in the PAQ, North Central CF reported there were no incarcerated individuals alleging sexual violence assigned to involuntary segregated housing. Additionally, during the twelve-month auditing period, the agency reported there were no incarcerated individuals placed in segregated housing due to risk of sexual victimization. The Auditor was able to confirm the information provided in the PAQ during her review of the allegations / investigative case files. Additionally, the Auditor interviewed a Unit Supervisor, the PREA Compliance Manager, and the Facility Warden and each confirmed the information previously provided by the facility in the PAQ. Therefore, incarcerated individuals in this targeted category were not interviewed. The Auditor conducted an interview with the Facility Warden regarding incarcerated individuals who alleged sexual violence. The Facility Warden explained incarcerated individuals who alleged sexual violence are rarely placed in involuntary segregated housing as the facility has the available housing to ensure their safety. However, if this were to occur, the incarcerated individual would be placed in involuntary segregated housing until an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely violence. The Facility Warden explained if an incarcerated individual who have made an allegation of sexual violence and expressed that they are in fear for their safety will be placed in segregated housing (Protective Custody), either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible, and the incarcerated individual will be released from segregation as soon as it can be determined that the incarcerated individual is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged. Upon review of the policy and documentation provided and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *AD-PR-13, Administration & Management, Employee Investigations & Discipline*

Interviews conducted with:

Investigative Staff

Incarcerated individuals who reported sexual violence

Site Review Observations:

Investigative files (4)

Findings (By Provision):

115.71 (a) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states all allegations and incidents of incarcerated individual-on-incarcerated individual sexual violence, retaliation, and staff neglect or violation of duty that may have contributed to such an incident shall be reported to the Warden, the institution's sexual violence investigator, and the Deputy Director of Institution Operations/Designee.

Iowa Department of Corrections Policy *AD-PR-13, Administration & Management, Employee Investigations & Discipline* states incidents of staff sexual misconduct, sexual harassment, retaliation, or staff neglect or violation of responsibilities that may have contributed to such incidents shall be reviewed and assigned for investigation by the IDOC Division of Investigative Services (DIS) Unit.

Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)*

states Deputy Director of Institution Operations/Designee shall determine when the evidence is sufficient for criminal prosecution and shall refer appropriate incidents to criminal authorities. All referrals shall be documented.

115.71 (b) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states in addition to the general training provided to all employees, the Deputy Director of Institution Operations shall ensure that, to the extent IDOC conducts sexual violence investigations, its sexual violence investigators have received specialized training in conducting such investigations in confinement settings.

115.71 (c) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states sexual violence investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence, including any available physical and DNA evidence and any available electric monitoring data; interview alleged victims, suspected perpetrators, and witnesses; review prior complaints and reports of sexual violence involving the suspected perpetrator, include an effort to determine whether staff actions or failures to act contributed to the abuse.

115.71 (d) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states when the quality of evidence appears to support criminal prosecution, the investigators shall conduct compelled interviews only after the designated Deputy Director/Designee has determined, including but not limited to consultation with prosecutors, if compelled interviews may be an obstacle for subsequent criminal prosecution.

115.71 (e) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as an incarcerated individual or staff. IDOC shall not require an incarcerated individual who alleges sexual violence shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of the allegation.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired, did the facility require him to submit to a polygraph test as a condition for proceeding with the investigation. The incarcerated individual confirmed to the Auditor that no one required him to complete a polygraph test as a condition of proceeding with the

investigation.

115.71 (f) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states investigators shall prepare a final written report that includes a description of the physical, testimonial, and documentary evidence, the reasoning behind credibility assessments, and investigative facts and findings. The report shall include whether staff actions or failures contributed to the abuse. The report shall be provided to the designated Deputy Director and the Warden. The report shall be a confidential record.

115.71 (g) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states IDOC shall make best efforts to ensure that criminal investigations by outside agencies are to be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and copies of all documentary evidence are attached where feasible.

115.71 (h) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the designated Deputy Director/Designee shall determine when the evidence is sufficient for criminal prosecution and shall refer appropriate incidents to criminal authorities. All referrals shall be documented.

115.71 (i) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the institution, and the Division of Investigation Services shall retain all written sexual violence investigation reports for long as the alleged perpetrator is incarcerated or employed by agency, plus five years.

115.71 (j) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the departure of the alleged perpetrator or victim from employment or control of IDOC shall not be the basis for terminating an investigation.

115.71 (k) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states IDOC shall make best efforts to ensure that any State entity or Department of Justice component that conducts such investigations shall do so pursuant to the above requirements.

115.71 (l) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states when outside agencies investigate sexual violence, IDOC shall

cooperate with outside investigators and shall endeavor to remain informed and keep the appropriate Deputy Director informed about the progress of the investigation.

The Auditor established, from a thorough review of IDOC policy, and the SANEs/SAFEs evidence protocol, that investigators assigned to the IDOC Division of Investigative Services (DIS) Unit follow the United States Department of Justice, *A National Protocol for Sexual Assault Medical Forensic Examinations* a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

The Auditor interviewed a Facility Investigator who confirmed attending and successful completion of the required specialized training. The Facility Investigator clearly articulated the comprehensive training received which included investigating sexual harassment allegations, investigating sexual violence allegations, understanding the impact of victim trauma, techniques for interviewing sexual violence victims, preservation of crime scene and evidence collection, proper use of *Miranda* and *Garrity* and the importance of each, and criteria required for administrative action and prosecution referrals.

The Investigator assigned to North Central CF provided the Auditor with an overview of the investigative process and the documentation required in a case when an allegation of sexual violence or sexual harassment incident occurs within the facility.

The Facility Investigator explained when an allegation of sexual violence is received and after the initial response and protective steps are taken, an initial incident report is submitted by the institution to the IDOC Division of Investigative Services (DIS). The initial report is reviewed and approved by the supervisor of DIS, who then assigns the investigation to a Facility Investigator. The investigation is initiated promptly by the assigned Facility Investigator who has received training and education and has the legal authority to conduct such investigations.

Upon receiving the assigned investigation by DIS, the Facility Investigator immediately begins the investigative process, which includes reviewing the initial report of the allegation, conducting scene investigation, review of evidence collected, photographs, video footage, conduct a complete media summary review – including emails, messages, phone calls, conduct interviews with victim, staff, witnesses, and alleged perpetrator, and complete a summary report and finalize the investigation.

The Facility Investigator also provided an overview of the various documentation contained in each case file to include but not limited to the Field Incident Report, Notice of Investigation, statements – victim, witness, perpetrator, medical documentation, victim advocacy form, summaries of video and media review, investigative findings and summary, Closure Letter(s) – victim, witness, perpetrator, Retaliation Tracking, and Sexual Violence Incident Review.

The Auditor reviewed four investigation files. All investigations were selected and reviewed based upon the initial reporting method, the outcome or investigation status (closed or open), and the Auditor’s requirement to review all the required steps and processes to verify compliance with multiple PREA Standards. The Auditor reviewed each investigation thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required.

The four investigations reviewed by the Auditor included two sexual abuse allegations and two sexual harassment allegations. The two sexual abuse allegations were both incarcerated individual-on-incarcerated individual allegations with one investigation closed as unsubstantiated, and one investigation closed as unfounded. The two sexual harassment allegations included one incarcerated individual-on-incarcerated individual allegation with the investigation closed as unsubstantiated. The remaining sexual harassment allegation was staff-on-incarcerated individual with the investigation closed as unfounded.

Each file reviewed by the Auditor contained all the appropriate documentation, and each incident was investigated promptly, thoroughly, and objectively by a qualified investigator who has the training and the authority to conduct such investigations. Each file contained documentation to include but not limited to the initial incident reports – summary of the allegation, demographics of involved staff or incarcerated individual(s) to include relevant history and current sentence, medical documentation and notes, photos of incarcerated individual victim and alleged aggressor, advocacy acceptance or refusal, victim, witness, and alleged aggressor statements, review of communications – emails, messages, and phone calls, review of video surveillance, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts, findings, and investigative summary, notification of case disposition to incarcerated individual, monitoring for retaliation forms, and sexual violence incident reviews.

Additionally, each completed report included an assessment as to whether staff actions or a failure to act on the part of staff contributed to the violence. The Auditor reviewed each case thoroughly and systematically to ensure each investigation

	followed procedures, contained all required and completed documentation, and that all processes were followed in accordance with policy and the PREA standards. Upon review of the policies and documentation listed above, and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Investigative Staff Findings (By Provision): 115.72 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states IDOC shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual violence are substantiated. The Auditor conducted an interview with a Facility Investigator and inquired what standard of evidence is required to substantiate allegations of sexual violence or sexual harassment. The Investigator confirmed no standard higher than a preponderance of the evidence for the sexual violence or sexual harassment allegation to be substantiated. Upon review of the policy and upon completion of the interviews, North Central CF demonstrated facility- wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Incarcerated individuals who reported sexual violence Investigative Staff Facility Warden Site Review Observations: Final Notifications – Closure Letters Findings (By Provision): 115.73 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states following an investigation into an allegation of incarcerated individual sexual misconduct the sexual violence investigator shall inform the incarcerated individual victim as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded, using the Investigator’s Closure Letter to Incarcerated Individual. 115.73 (b) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states if IDOC did not conduct the investigation, it shall request the relevant information from the investigative agency in order to inform the incarcerated individual. 115.73 (c) – Iowa Department of Corrections Policy <i>PREA-03, Prison Rape Elimination</i>

Act (PREA) states following a substantiated or unsubstantiated investigation of an allegation of staff sexual misconduct, the institution shall subsequently inform the incarcerated individual victim whenever

- The staff member is no longer posted within the incarcerated individual's unit.
- The staff member is no longer employed at the facility.
- The staff member has been indicted on a charge related to sexual violence within the facility; or
- The staff member has been convicted on a charge related to sexual violence within the facility.

115.73 (d) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states following a substantiated or unsubstantiated investigation of an allegation of sexual abuse the institution shall subsequently inform the incarcerated individual victim whenever:

- The institution learns that the alleged perpetrator has been indicated on a charge related to sexual abuse within the facility;
- The institution learns that the alleged perpetrator has been convicted on a charge related to sexual abuse within the facility;

115.73 (e) – Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states all such notification or attempted notifications shall be documented.

115.73 (f) Iowa Department of Corrections Policy *PREA-03, Prison Rape Elimination Act (PREA)* states IDOCs obligation to report under this standard shall terminate if the incarcerated individual is released from IDOC custody.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired if the facility notified him of the final decisions made regarding the allegation and if such notification was in writing. The incarcerated individual confirmed to the Auditor he was notified by staff of the case disposition. The Auditor verified the notification while reviewing the investigative files and the incarcerated individual notification contained the date, case disposition, and incarcerated individual signature.

The Auditor inquired to the Facility Investigator about the agency's notification procedures, to an alleged victim of sexual violence, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or

	unfounded. The Facility Investigator confirmed that such notifications are completed by the Facility Investigator and is documented upon completion. The Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an incarcerated individual who makes an allegation of sexual violence when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that once the investigation has been completed, the Facility Investigator completes the notification process to the incarcerated individual. Upon review of the policies and upon completion of the interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Interviews conducted with: Administrative (Human Resources) Staff Findings (By Provision): 115.76 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states staff shall be subject to disciplinary sanctions up to and including for violating IDOC policies relating to sexual misconduct, sexual harassment, retaliation, or for any neglect or violation of duty that may have contributed to such incidents.

	115.76 (b) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual misconduct. 115.76 (c) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states disciplinary sanctions for violations of IDOC policies relating to sexual misconduct, sexual harassment, retaliation, or for any neglect or violation of duty that may have contributed to such incidents, shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. 115.76 (d) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states all terminations for violations of IDOC policies relating to sexual misconduct, sexual harassment, retaliation, or for any neglect or violation of duty that may have contributed to such incidents or resignations by staff who would have been terminated if not for their resignation, shall be referred for criminal prosecution by the designated Deputy Director when the evidence is sufficient for a criminal referral, and by the appropriate institution management team member to any relevant licensing bodies. The facility reported no staff violations, resignations prior to termination, or terminations for violating the agency’s sexual abuse or sexual harassment policies during the twelve-month auditing period. The Auditor conducted an interview with Administrative / HR Staff Member who confirmed that North Central CF had no staff members violate, resign prior to termination, or be terminated for violating the agency’s policy against sexual violence or sexual harassment during the past twelve months. Upon review of the policy, facility documentation, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *AD-CI-01, Administration & Management*

Interviews conducted with:

Facility Warden

Findings (By Provision):

115.77 (a) – Iowa Department of Corrections Policy *AD-CI-01, Administration & Management* states any volunteer who engages in sexual assault, sexual abuse, or sexual harassment shall be prohibited from contact with incarcerated individuals and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

115.77 (b) – Iowa Department of Corrections Policy *AD-CI-01, Administration & Management* states the institution shall take appropriate remedial measures and shall consider whether to prohibit further contact with incarcerated individuals, in the case of any other violation of IDOC sexual violence or sexual harassment policies by the contractor or volunteer.

The facility reported there have been no contractor or volunteer violations or terminations of the agency's sexual violence or sexual harassment policies during the twelve-month auditing period.

The Auditor conducted an interview with the Facility Warden regarding any violation of the facility's sexual violence and sexual harassment by a contractor or volunteer. The Facility Warden explained that the incident would be reported to the Division of Investigative Services (CID) and an investigation would be conducted. If the investigation shows the activity was criminal, then the incident will be reported to local law enforcement. The Facility Warden also explained the incident would be reported to any relevant licensing entities and the contractor or volunteer would be prohibited from any further contact at North Central CF or any facility within the agency.

	Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IO-RD-03, Institutional Operations, Rules & Discipline</i> Iowa Department of Corrections Policy <i>OP-SOP-08, Offender Programs, Sex Offense Programs</i> Interviews conducted with: Facility Warden Medical / Mental Health Staff Findings (By Provision): 115.78 (a) – Iowa Department of Corrections Policy <i>IO-RD-03, Institutional Operations, Rules & Discipline</i> states it is the policy of the IDOC to use appropriate disciplinary action in the management of offender violations of IDOC and institutional rules, regulations, policies, and procedures. Where the use of informal action or minor disciplinary report procedures are not appropriate or insufficient to achieve correctional goals, the major report process shall be used. 115.78 (b) – Iowa Department of Corrections Policy <i>IO-RD-03, Institutional Operations, Rules & Discipline</i> states the class of an offense determines the range of authorized sanction(s) that can be imposed by the Administrative Law Judge (ALJ) for violation of rules listed in policy.

115.78 (c) – Iowa Department of Corrections Policy *IO-RD-03, Institutional Operations, Rules & Discipline* states if an offender is in a special needs or mental health status at the time of the incident, the investigator must obtain a statement from a mental health professional as to the offender’s responsibility for the offender’s conduct as stated in the report. The ALJ shall make a record of this statement.

115.78 (d) – Iowa Department of Corrections Policy *IO-RD-03, Institutional Operations, Rules & Discipline* states if the facility offers therapy, counseling, or other interventions designed to address and correct possible underlying reasons or motivations for the violence, consideration shall be made to determine if participation should be a requirement for access to programming or other benefits.

Iowa Department of Corrections Policy *OP-SOP-08, Offender Programs, Sex Offense Programs* states incarcerated individuals shall be reviewed by their institutional classification team and the team shall forward the incarcerated individual name and information for a referral to Sex Offense Treatment Program (SOTP) review to the SOTP Director if the incarcerated individuals who score Aggressor Incarcerated (AI) on the Sexual Violence Propensity Assessment.

115.78 (e) – Iowa Department of Corrections Policy *IO-RD-03, Institutional Operations, Rules & Discipline* states an incarcerated individual may be disciplined for proposing a consensual sexual contact or relationship with staff only upon a finding that the staff member did not explicitly or implicitly consent to or encourage such a proposal.

115.78 (f) – Iowa Department of Corrections Policy *IO-RD-03, Institutional Operations, Rules & Discipline* states a report of sexual assault or sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred, shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

115.78 (g) – Iowa Department of Corrections Policy *IO-RD-03, Institutional Operations, Rules & Discipline* states sexual misconduct between incarcerated individuals is prohibited and shall result in disciplinary sanctions in accordance with the IDOC Disciplinary Rules and Procedures for incarcerated individuals. However, sexual misconduct between incarcerated individuals shall not constitute sexual violence if it is determined the activity is consensual.

North Central CF reported there were no administrative findings of incarcerated

	individual-on-incarcerated individual sexual abuse that occurred in the facility during the twelve-month auditing period. IDOC Incarcerated Individual Rules & Handbook and Iowa Department of Corrections <i>Staying Safe: A Guide for Offender Conduct</i> states sexual misconduct between incarcerated individuals is prohibited and shall result in disciplinary sanctions in accordance with the Iowa Department of Corrections Policy <i>IO-RD-03, Institutional Operations, Rules & Discipline</i>. The Auditor conducted an interview with the Facility Warden and discussed the facility's policy on disciplinary sanctions for an incarcerated individual after an administrative or criminal finding that the incarcerated individual engaged in incarcerated individual-on-incarcerated individual sexual violence. The Facility Warden referred to the existing policy that an incarcerated individual would be subject to disciplinary sanctions, which would be conducted in accordance with the formal disciplinary process. The Auditor conducted an interview with Medical and Mental Health Practitioners and discussed the victim advocacy services available to incarcerated individuals and counseling services available for abusers. Both Medical and Mental Health Practitioners explained the services provided at the facility include one-on-one counseling, and support groups. These services are offered for victims of sexual violence or sexual harassment as well as offenders of sexual violence. Upon review of the policy, IDOC Incarcerated Individual Rules & Handbook, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>IS-RO-01, Institutional Services, Reception &</i>

Orientation

Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services*

Interviews conducted with:

Incarcerated individuals who disclose Sexual Victimization at Risk Screening

Staff responsible for Risk Screening

Medical & Mental Health Staff

Findings (By Provision):

115.81 (a, c) - Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states if the paper *SVP - Intake Screening Tool* or the *Sexual Violence Propensity (SVP) Assessment* in ICON indicates that the incarcerated individual has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure the incarcerated individual is offered a follow-up meeting with a medical and mental health practitioner within 14 days of the SVP.

115.81 (b) - Iowa Department of Corrections Policy *IS-RO-01, Institutional Services, Reception & Orientation* states if the *Sexual Violence Propensity (SVP) Intake Screening Tool* or the *Sexual Violence Propensity (SVP) Assessment* in ICON indicates that the incarcerated individual has previously perpetrated sexual violence, whether it occurred in an institutional setting or in the community, staff shall ensure the incarcerated individual is offered a follow-up meeting with a medical and mental health practitioner within 14 days of the SVP.

The Auditor conducted an interview with the PREA Compliance Manager and inquired if an incarcerated individual discloses prior sexual victimization or if a screening indicates an incarcerated individual has previously perpetrated sexual abuse, do you offer a follow-up meeting with Medical or Mental Health Practitioner. The PREA Compliance Manager confirmed incarcerated individuals meeting this requirement are offered follow-up meetings with medical or mental health practitioners.

The Auditor conducted interviews with incarcerated individuals who disclosed prior

	sexual victimization during intake. All three incarcerated individuals confirmed to the Auditor that each were offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process. One of the three incarcerated individuals interviewed accepted the opportunity to meet with mental health staff. The incarcerated individual confirmed meeting with mental health practitioner within a couple of days to a week. 115.81 (d) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/ Specialty Services</i> states any information related to sexual violence that occurred in an institutional setting shall be strictly limited to Medical and Mental Health Practitioners and other staff, as necessary, to inform of treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. 115.81 (e) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/ Specialty Services</i> states Medical and Mental Health Practitioners shall obtain informed consent from incarcerated individuals before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the incarcerated individual is under the age of 18. The Auditor conducted interviews with Medical and Mental Health Practitioners and inquired if informed consent is obtained from inmates before reporting about prior sexual victimization that did not occur in an institutional setting. Both Medical and Mental Health Practitioners confirmed that they do obtain informed consent from incarcerated individuals prior to reporting about sexual victimization that did not occur in an institutional setting. Upon review of the policy, documentation, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ

Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services*

Interviews conducted with:

Incarcerated individuals who reported sexual violence

Medical / Mental Health Staff

Security Staff / Non-Security Staff First Responders

Site Review Observations:

Secondary Medical Records

Findings (By Provision):

115.82 (a, b) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states incarcerated individual victims of sexual abuse while incarcerated shall receive timely, unimpeded access to emergency medical treatment and Centers Against Abuse & Sexual Assault, the nature, and scope of which are determined by Medical and Mental Health Practitioners according to their professional judgement.

The Auditor conducted interviews with random staff members regarding his/her role as a First Responder to an allegation of sexual violence. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual violence allegation as well as his or her role as a First Responder.

115.82 (c) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states incarcerated individual victims of sexual abuse will be offered timely information and access to emergency contraception and sexually transmitted infections prophylaxis in accordance to professionally accepted standards

	of care, where medically appropriate. The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired, after reporting, if the facility provided immediate access to medical and mental health treatment. The incarcerated individual confirmed, after reporting the incident, he was immediately escorted to medical where an evaluation and treatment services were provided, and he had the opportunity to meet with mental health staff. The Auditor also inquired to the incarcerated individual if he was offered tests for sexually transmitted infections and if payment for any of the services provided were required. The incarcerated individual informed the Auditor that such treatment was not necessary or warranted and denied being charged for any medical treatment related to the incident. 115.82 (d) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/ Specialty Services</i> states treatment services shall be consistent with the community level of care and provided without financial cost regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. The Auditor conducted interviews with Medical and Mental Health Practitioners and inquired about the required protocols that would be completed if an incarcerated individual reported an incident of sexual violence within the facility. Each Medical and Mental Health Practitioner described the process to the Auditor to include a systematic overview of the initial treatment process and the documentation required when an incarcerated individual receives medical or mental health care services. Additionally, during the interview the Medical Practitioner confirmed incarcerated individual victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Practitioner explained the services provided at the facility and included counseling and emotional support services. Upon review of the policy and upon completion of staff interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> Interviews conducted with: Medical / Mental Health Staff Incarcerated individuals who reported sexual violence Findings (By Provision): 115.83 (a) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> states incarcerated individuals who report sexual abuse while incarcerated shall receive timely, unimpeded access to emergency medical treatment and Centers Against Abuse & Sexual Assault. 115.83 (b) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> states the evaluation and treatment of victims of sexual violence in any prison, jail, lockup, or juvenile facility shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to, or placement in, another facility, or their release from custody. 115.83 (c, g) – Iowa Department of Corrections Policy <i>HSP-628, Health Services, Acute/Specialty Services</i> states treatment services shall be consistent with the community level of care and provided without financial cost regardless of whether the victim names the aggressor or cooperates with any investigation arising out of the incident. 115.83 (d, e) – North Central Correctional Facility houses male inmates; therefore, this provision of the standard are not applicable.

115.83 (f) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states medical staff shall offer incarcerated individuals of sexual abuse timely information and access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care where medically appropriate.

115.83 (h) – Iowa Department of Corrections Policy *HSP-628, Health Services, Acute/Specialty Services* states all institutions shall attempt to conduct a mental health evaluation of all known incarcerated individual-on-incarcerated individual aggressors within 60 days of learning of such violence history and offer treatment when deemed appropriate by mental health practitioners.

The Auditor conducted an interview with Medical and Mental Health Practitioners at the facility and both Medical and Mental Health Practitioners confirmed that incarcerated individual victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each medical and mental health practitioner explained the services provided at the facility include advocacy and emotional support services. These services are offered for victims of sexual violence or sexual harassment as well as incarcerated individuals of sexual violence.

The Auditor conducted a targeted interview with an incarcerated individual who reported an incident of sexual abuse or sexual harassment and inquired, after reporting the incident, did he see a Medical or Mental Health staff member in a timely manner and did anyone provide treatment or follow-up plans. The incarcerated individual confirmed, after reporting the incident, he was immediately escorted to medical where an evaluation and treatment services were provided, and he had the opportunity to meet with medical and mental health staff. Additionally, the incarcerated individual confirmed he was informed of the advocacy services available from a Qualified Staff Member or the Centers Against Abuse & Sexual Assault. Documentation and investigative files reviewed by the Auditor confirmed that victim advocacy services were offered and each incarcerated individual refused the services. The Auditor also inquired to the incarcerated individual if he was offered tests for sexually transmitted infections and if payment for any of the services provided were required. The incarcerated individual informed the Auditor that such treatment was not necessary or warranted and denied being charged for any medical treatment related to the incident.

Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Sexual Abuse Incident Reviews Interviews conducted with: Facility Warden Incident Review Team Findings (By Provision): 115.86 (a) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states the institution, in association with the PREA Coordinator, shall conduct a sexual violence incident review at the conclusion of every sexual violence investigation that results in a substantiated or unsubstantiated finding. 115.86 (b) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination Act (PREA)</i> states such review shall ordinarily occur within 30 days of the conclusion of the investigation. North Central CF PAQ reported in the past twelve months, excluding investigations determined to be unfounded, two criminal/administrative investigations of alleged sexual abuse were completed at the facility and were followed by a sexual abuse incident review within 30 days. During the Auditor’s review of the closed investigations, a sexual violence incident review was completed for each closed investigation and all sexual violence incident reviews were completed within the required 30 days. 115.86 (c) – Iowa Department of Corrections Policy <i>PREA-02, Prison Rape Elimination</i>

Act (PREA) states the review team shall include:

- Warden/District Director or designee;
- Unit Managers or other upper-level management team members responsible for the areas of the institution where the incident occurred;
- Shift supervisors involved with the case or the shift on which the misconduct occurred;
- At least one of the sexual violence investigators on the case;
- Medical or mental health practitioners when involved with the perpetrator or the victim;
- Institution's PREA Compliance Manager/PREA Coordinator;
- PREA Coordinator in substantiated cases of staff sexual misconduct incarcerated individual sexual abuse.

115.86 (d) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the review team shall:

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual violence;
- 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 was motivated or otherwise caused by other group dynamics at the institution.
- Examine the areas where the incident occurred to assess whether physical barriers in the area may enable abuse;
- Assess the adequacy of staffing levels in that area during different shifts;
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its findings and include any recommendations for improvement.

115.86 (e) – Iowa Department of Corrections Policy *PREA-02, Prison Rape Elimination Act (PREA)* states the institution shall implement recommendations for improvement or shall document its reasons for not doing so.

The Auditor conducted an interview with a Sexual Abuse Incident Review (SAIR) Team staff member and inquired if the SAIR Team considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the SAIR Team examines the area in the facility where the incident allegedly occurred. The SAIR Team staff member confirmed the SAIR Team does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. The SAIR Team also tours the area where the alleged incident occurred as well as considering if the

	addition of monitoring technology should be deployed to supplement supervision by staff. The SAIR Team member explained how touring the area provides the team with the best possible representation of an incident and assists the SAIR Team in determining if adding monitoring technology is warranted. The Auditor conducted an interview with the Facility Warden and discussed the incident review process. The Facility Warden explained that the SAIR Team includes upper-level management with input from Investigators, Line Staff, and Medical and Mental Health Practitioners. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained how the SAIR Team uses the information obtained from the review to determine if changes need to be made to the physical plant, policy and procedure or any other change that would improve the safety of the incarcerated individual population and prevent sexual violence. Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Annual PREA Report (2024) Department of Justice, Survey of Sexual Violence (SSV) Findings (By Provision): 115.87 (a) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states the PREA Coordinator shall collect accurate, uniform data for every allegation of sexual violence at all institutions using a standardized instrument and set of definitions.

	115.87 (b) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states the incident based sexual violence data shall be aggregated at least annually. 115.87 (c) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states the incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. 115.87 (d) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states the PREA Coordinator shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and incident reviews. 115.87 (e) – Iowa Department of Corrections does not contract for the confinement of incarcerated individuals; therefore, this provision of the standard does not apply. 115.87 (f) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states the PREA Coordinator shall provide all such data from the previous calendar year to the Department of Justice no later than June 30 each year. The Auditor reviewed the recent IDOC Annual Report which contained sexual violence data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual violence incident reviews. The Iowa Department of Corrections publishes the reports on the agency website https://doc.iowa.gov/prison-rape-elimination-act Upon review of the policy, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

North Central CF PAQ

Iowa Department of Corrections Policy *PREA-04, Prison Rape Elimination Act (PREA)*

Iowa Department of Corrections Annual PREA Report (2024)

Interviews conducted with:

PREA Compliance Manager

PREA Coordinator / Coordinator

Agency Head

Findings (By Provision):

115.88 (a) – Iowa Department of Corrections Policy *PREA-04, Prison Rape Elimination Act (PREA)* states the Office of the Deputy Director of Institution Operation shall review data collected and aggregated in order to assess and improve the effectiveness of IDOC’s sexual abuse prevention, detection, and response policies, practices, and training, including by:

- Identifying problem areas;
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings and corrective actions for each institution, as well as the department.

The Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the institution data is reviewed and retained for use in annual reporting, submission to the DOJ for the Survey of Sexual Violence and retained for any other DOJ request. The information from the facilities is also reviewed to determine any facility trends, training gaps or deficiencies, education gaps for the population, or any policy/procedure updates that need to be implemented.

115.88 (b) – Iowa Department of Corrections Policy *PREA-04, Prison Rape Elimination Act (PREA)* states the annual report shall include a comparison of the current year’s

data and corrective actions with those from prior years and shall provide an assessment of IDOC's progress in addressing sexual violence.

The Auditor reviewed the recent IDOC Annual Report, which contained sexual violence data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual violence incident reviews. The Iowa Department of Corrections publishes the reports on the agency website <https://doc.iowa.gov/prison-rape-elimination-act>

115.88 (c) – Iowa Department of Corrections Policy *PREA-04, Prison Rape Elimination Act (PREA)* states annual reports shall be approved by the Director and posted on the IDOC website.

115.88 (d) – Iowa Department of Corrections Policy *PREA-04, Prison Rape Elimination Act (PREA)* states specific material from the reports may be redacted when publication would present a clear and specific threat to the safety and security of an institution, but IDOC shall indicate the nature of the material redacted.

The Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained on the Sexual Violence Database, which is only accessible by the PREA Coordinator, Central Office Executive Staff, Institutional Executive Staff (only access to their institutions), PREA Compliance Managers, and Sexual Violence Investigators.

The PREA Coordinator confirmed the preparation of an annual report which contains data collected from all IDOC facilities. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

The Auditor conducted an interview with the Agency Head and inquired how the agency uses incident-based sexual violence data to assess and improve sexual violence prevention, detection, and response policies, practices, and training. The Agency Head explained that the data is used to determine at risk facilities and areas of facilities, identify training issues, identify issues in policy, procedure, and practice, and to assess prevention and detection practices. The data is used to develop policy and procedures, to develop or improve training, and is used in determining staffing plans and technology use and improvement.

	The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head confirmed, as the Director of Iowa Department of Corrections, she is responsible for reviewing and approving the annual PREA report. Upon review of the policy, SSV reports, and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: North Central CF PAQ Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> Iowa Department of Corrections Annual PREA Report (2024) Interviews conducted with: PREA Coordinator Findings (By Provision): 115.89 (a) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states all data collected shall be securely maintained. 115.89 (b) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states aggregated sexual violence data, from all IDOC operated facilities, including privately contracted facilities, shall be readily available to the public at least annually, through a website or other means.

	115.89 (c) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states personal identifiers and sensitive information shall be redacted from the reports in instances when publication would present a clear and specific threat to the safety and security of a facility, while maintaining the nature of the material. 115.89 (d) – Iowa Department of Corrections Policy <i>PREA-04, Prison Rape Elimination Act (PREA)</i> states all sexual violence data collected shall be maintained for at least ten years after the date of the initial collection unless Federal, State, or local law requires otherwise. The Auditor reviewed the recent IDOC Annual Report, which contained sexual violence data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual violence incident reviews. The Iowa Department of Corrections publishes the reports on the agency website https://doc.iowa.gov/prison-rape-elimination-act The Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained on the Sexual Violence Database, which is only accessible by the PREA Coordinator, Central Office Executive Staff, Institutional Executive Staff (only access to their institutions), PREA Compliance Managers, and Sexual Violence Investigators. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information. Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.401 (a) – During the prior three-year audit period, the agency ensured that each facility operated was audited, once.

	115.401 (b) – Iowa Department of Corrections, North Central CF had its previous PREA Audit conducted on May 9 – 10, 2023; the first year of the fourth three-year auditing cycle. This audit was conducted on April 30 – May 1, 2026; the first year of the fifth three-year auditing cycle. 115.401 (h) – The Auditor was granted complete access to, and the ability to observe, all areas of the facility. 115.401 (i) – The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). 115.401 (m) – The Auditor was permitted to conduct private interviews with incarcerated individuals and staff. 115.401 (n) – The Auditor verified through incarcerated individual and staff interviews that incarcerated individuals and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel. Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 (b) – Iowa Department of Corrections publishes all PREA Audit Reports for all facilities within the IDOC on the agency website. North Central Correctional Facility has published the prior PREA Audit Reports on the agency website. The Auditor reviewed the prior PREA Audit Report (May 2023) for North Central CF. Upon review of the policy and upon completion of interviews, North Central CF demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	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).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	no
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	na

	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)?	na
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes

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

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

	consent or refuse?	
	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	yes

	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?	
	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.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the	yes

	agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes

	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	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).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with	yes

	inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	
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 Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	

	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental	yes

	health care practitioners who work regularly in its facilities.)	
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	
	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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of	yes

	being sexually abusive, to inform: Education Assignments?	
	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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they	yes

	are at high risk of sexual victimization have access to: Programs to the extent possible?	
	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	yes

	can be arranged?	
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
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,	yes

	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.)	
	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?	yes

	(N/A if agency is exempt from this standard.)	
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of	yes

	understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of	yes

	confidentiality, at the initiation of services?	
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	yes

	required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate	yes

	with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial	yes

	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	

	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following 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	yes

	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?	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who	yes

	have engaged in sexual abuse?	
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	

	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	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).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	

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

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

	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.)	
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	

	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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,	yes

	investigation files, and sexual abuse incident reviews?	
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted	yes

	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?	
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by	na

	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.)	
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes