

# PREA Facility Audit Report: Final

**Name of Facility:** Clarinda Correctional Facility

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 04/25/2025

## 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:** Ronell Prioleau

**Date of Signature:** 04/25/2025

## AUDITOR INFORMATION

**Auditor name:** Prioleau, Ronell

**Email:** r.prilo@yahoo.com

**Start Date of On-Site Audit:** 03/19/2025

**End Date of On-Site Audit:** 03/21/2025

## FACILITY INFORMATION

**Facility name:** Clarinda Correctional Facility

**Facility physical address:** 2000 North 16th Street, Clarinda, Iowa - 51632

**Facility mailing address:**

## Primary Contact

<b>Name:</b>	Beth Reiter
<b>Email Address:</b>	bethany.reiter@iowa.gov
<b>Telephone Number:</b>	712-695-7039

#### Warden/Jail Administrator/Sheriff/Director

<b>Name:</b>	Steve Weis
<b>Email Address:</b>	stephen.weis@iowa.gov
<b>Telephone Number:</b>	712-695-7092

#### Facility PREA Compliance Manager

<b>Name:</b>	Bethany Reiter
<b>Email Address:</b>	bethany.reiter@iowa.gov
<b>Telephone Number:</b>	712 695-7042

#### Facility Health Service Administrator On-site

<b>Name:</b>	Doris Green
<b>Email Address:</b>	doris.green@iowa.gov
<b>Telephone Number:</b>	712-695-7080

#### Facility Characteristics

<b>Designed facility capacity:</b>	750
<b>Current population of facility:</b>	1019
<b>Average daily population for the past 12 months:</b>	1006
<b>Has the facility been over capacity at any point in the past 12 months?</b>	Yes
<b>What is the facility's population designation?</b>	Men/boys

<b>In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</b>	
<b>Age range of population:</b>	18-87
<b>Facility security levels/inmate custody levels:</b>	Medium
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	235
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	285
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	12

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

<b>Agency Chief Executive Officer Information:</b>
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<b>Name:</b>	Beth Skinner
<b>Email Address:</b>	beth.skinner@iowa.gov
<b>Telephone Number:</b>	515-725-5701

Agency-Wide PREA Coordinator Information			
<b>Name:</b>	Deanne Krumm	<b>Email Address:</b>	deanne.krumm@iowa.gov

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>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.</p> <p>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.</p>	
<b>Number of standards exceeded:</b>	
0	
<b>Number of standards met:</b>	
45	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-03-19
2. End date of the onsite portion of the audit:	2025-03-21

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Catholic Charities Sexual Assault Coordinator (SL) and Clarinda Health Centers Chief Executive Officer (CN)

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	750
15. Average daily population for the past 12 months:	1006
16. Number of inmate/resident/detainee housing units:	13
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

<b>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1028
<b>19. 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:</b>	73
<b>20. 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:</b>	133
<b>21. 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:</b>	0
<b>22. 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:</b>	24
<b>23. 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:</b>	0
<b>24. 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:</b>	0

<b>25. 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:</b>	10
<b>26. 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:</b>	16
<b>27. 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:</b>	47
<b>28. 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:</b>	0
<b>29. 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):</b>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>30. 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:</b>	233
<b>31. 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:</b>	15

<b>32. 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:</b>	316
<b>33. 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:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	28
<b>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>
<b>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	I reviewed the number of inmates required to interview. I reviewed all the inmate races, age span and varied release dates within the population. I then ensured I considered a variety of race, age and release dates. I further ensured I considered inmates from each housing unit. I also considered program assignments.



<b>37. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>38. 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):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	15
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>40. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>41. 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:</b>	1

<b>42. 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:</b>	0
<b>42. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<b>42. 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).</b>	<p>The completed PAQ information collaborated the numbers the facility provided. Multiple interviews conducted and during the site review did not produce any of this targeted group of inmates. I verified by asking all inmates who were interviewed if they were a person with a disability or part of a targeted group. I further asked if they knew of any other inmates that may be part of the targeted groups. The Auditor interviewed all the residents that were available to be interviewed.</p>
<b>43. 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:</b>	1
<b>44. 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:</b>	0

<p><b>44. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>44. 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).</b></p>	<p>The completed pre-audit questionnaire information/data collaborated the numbers the facility provided. Multiple interviews conducted and during the site review did not produce any of this targeted group of inmates. I verified by asking all inmates who were interviewed if they were a person with a disability or part of a targeted group. I further asked if they knew of any other inmates that may be part of the targeted groups. The Auditor interviewed all the residents that were available to be interviewed.</p>
<p><b>45. 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:</b></p>	<p>0</p>
<p><b>45. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>45. 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).</b></p>	<p>The completed pre-audit questionnaire information/data collaborated the numbers the facility provided. Multiple interviews conducted and during the site review did not produce any of this targeted group of inmates. I verified by asking all inmates who were interviewed if they were a person with a disability or part of a targeted group. I further asked if they knew of any other inmates that may be part of the targeted groups. The Auditor interviewed all the residents that were available to be interviewed.</p>
<p><b>46. 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:</b></p>	<p>4</p>
<p><b>47. 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:</b></p>	<p>4</p>
<p><b>48. 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:</b></p>	<p>2</p>
<p><b>49. 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:</b></p>	<p>0</p>

<b>49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>49. 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).</b>	The completed pre-audit questionnaire information/data collaborated the numbers the facility provided. Multiple interviews conducted and during the site review did not produce any of this targeted group of inmates. I verified by asking all inmates who were interviewed if they were a person with a disability or part of a targeted group. I further asked if they knew of any other inmates that may be part of the targeted groups. The Auditor interviewed all the residents that were available to be interviewed.
<b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>51. Enter the total number of RANDOM STAFF who were interviewed:</b>	12
<b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None

<p><b>If "Other," describe:</b></p>	<p>I reviewed the number of staff required to interview. I reviewed all the staff shifts, races, gender and ranking positions or job titles. I then ensured I considered a variety of gender and race and choose persons from each shift. I further ensured I considered staff from varying jobs and disciplines. I also considered the total number of available staff.</p>
<p><b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>54. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No text provided.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>23</p>
<p><b>56. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>58. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

**59. 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)

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

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



	<input type="checkbox"/> Other
<b>61. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>61. Enter the total number of VOLUNTEERS who were interviewed:</b>	2
<b>61. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>62. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>62. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
<b>63. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	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.

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

☒ Yes

☐ No

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

**65. 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

**66. 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

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

☒ Yes

☐ No

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

☒ Yes

☐ No

<b>69. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	No text provided.
<b>Documentation Sampling</b>	
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.	
<b>70. 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?</b>	<input checked="checked" type="radio"/> Yes  <input type="radio"/> No
<b>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
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.	

**72. 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
<b>Inmate-on-inmate sexual abuse</b>	10	0	10	0
<b>Staff-on-inmate sexual abuse</b>	4	0	4	0
<b>Total</b>	14	0	14	0

**73. 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
<b>Inmate-on-inmate sexual harassment</b>	10	0	10	0
<b>Staff-on-inmate sexual harassment</b>	5	0	5	0
<b>Total</b>	15	0	15	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.

#### 74. 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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	7	1
Staff-on-inmate sexual abuse	0	2	2	0
Total	0	4	9	1

### 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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	3	6	1
<b>Staff-on-inmate sexual harassment</b>	0	0	2	3
<b>Total</b>	0	3	8	4

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

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

10

<b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	6
<b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	4
<b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	10
<b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	5
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)



**Staff-on-inmate sexual harassment investigation files**

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

5

**92. 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)

**93. 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)

**94. 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**

**95. 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

**96. 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

**97. 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**

Correctional Consulting Services

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>CCF Organization Chart</p> <p>Informal Conversations with Staff</p> <p>The Iowa Department of Corrections Agency (IDOC) and Clarinda Correctional Facility has a written policy that mandates zero tolerance toward all forms of sexual abuse and sexual harassment, and it outlines the Agency's approach to preventing, detecting, and responding to such conduct. The Agency has designated an upper-</p>

	<p>level, agency-wide PREA Coordinator with sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities. During the interviews with the PREA Coordinator and the PREA Compliance Manager both outlined their duties to illustrate their ability to manage all the required duties associated with their positions. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. The Auditor reviewed the entire policy and observed staff carry out their duties within the facility. The staff managed general operations and incidents according to policy and were able to discuss specifics of the policy.</p> <p>After a careful and detailed review, the Auditor determined the facility meets the requirements of the standard.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence Relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>The Clarinda Correctional Facility does not manage public contracts for the confinement of its inmates. Information from the interview with the Iowa Department of Corrections (IDOC), Agency Contract Administrator confirms that contracts are managed from the agency level. The Contract Administrator indicated currently, there are no active contracts to house offenders in other facilities outside of state facilities. IDOC manages all of its own State operated facilities. This policy procedure is documented within the IDOC PREA policy and verified by this Auditor.</p> <p>After a careful and detailed review, this standard appears to be not applicable and as such the Auditor determined that the facility meets the requirements of the standard.</p>

<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>Evidence relied upon to make Compliance Determination:</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC Policy</p> <p>Staffing Plan</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>The Iowa Department of Corrections (IDOC)/Clarinda Correctional Facility has staffing plan that it reviews on a regular basis that provides adequate levels of staffing, and, where applicable, video monitoring to protect inmates and staff against sexual abuse. During interviews with the Warden and the PREA Compliance Manager, it was confirmed that when establishing and reviewing the staffing plan, considerations are taken for current and new best correctional practices; any judicial or oversight rulings; the physical layout of the facility; the inmate population security level; the staff to inmate ratio to include supervisors; the current programming abilities afforded on each shift; the number of sexual assault incidents within specific areas of the facility; relevant state and local laws and any extenuating circumstances. A review of the staffing plan is conducted and documented yearly, and camera review is completed weekly. Camera/video coverage is extensive throughout the facility, the staffing levels are appropriate and mitigates the blind spots within the facility layout.</p> <p>IDOC has a PREA Policy that outlines intermediate-level or higher-level supervisors must conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy and practice include all shifts and must be logged in via electronic handheld device. The policy also prohibits staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is a security function. The Auditor witnessed these rounds being conducted and reviewed multiple electronic housing unit round printouts to verify this was a regular shift function, but irregular timed security function. This was further verified by interviewing random staff and inmates.</p> <p>The Auditor reviewed the current staffing plan dated January 2025. There have been no deviations from the staffing plan within the last 12 months. The Auditor confirmed through informal conversations with staff that overtime is used to fill vacant critical posts.</p> <p>After careful and detailed review, the Auditor determined the facility meets the requirements of this standard.</p>
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	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>Clarinda Correctional Facility does not house youthful inmates. This was verified through policy reviews, formal and informal interviews.</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Random Inmate Interview Notes</p> <p>Random Staff Interview Notes</p> <p>Target Inmate Interview Notes</p> <p>Informal conversations with Staff and Inmates</p> <p>Site Review Observations</p> <p>The Clarinda Correctional Facility does not conduct cross-gender visual body cavity searches or strip searches unless in exigent circumstances or when conducted by a medical examiner. The facility does not house female inmates and has not conducted any cross-gender searches within the facility within the last 12 months. The Auditor reviewed policy, that allow inmates to shower, perform bodily functions, and change</p>

	<p>clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.</p> <p>The Auditor observed all areas of the facility and housing units and noted single person showers in use throughout the facility and appropriate dressing areas. Other areas had toilets within the cells which created a level of privacy. The inmate strip areas had partitions or curtains and is only staffed by male security staff.</p> <p>The current policy also requires staff of the opposite gender to announce their presence when entering an inmate housing unit. Although multiple inmates interviewed stated female staff do not announce their presence when entering the housing/cellblock areas; the Auditor witnessed this announcement multiple times throughout the site review. The Auditor reentered multiple cellblocks to conduct additional random informal conversations with inmates regarding the female staff announcements when entering the cellblocks. The additional informal conversations indicated these announcements are being conducted but are sometimes not loud enough for everyone to hear.</p> <p>The Clarinda Correctional Facility has never searched or physically examined a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, it would be determined as part of a broader medical examination conducted in private by a medical practitioner or by reviewing medical records or patient-doctor conversations. This was verified through multiple interviews of random staff, specialized staff interviews and informal and formal conversations with transgender inmates. The facility has ensured all security staff are trained on how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Staff training records and search and seizure training slides were reviewed to verify all staff were trained how to conduct cross-gender searches and pat-down searches of transgender and intersex inmates.</p> <p>After a careful and detailed review of all the information, this Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p>

	<p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Site Review Observations</p> <p>Protocol Testing</p> <p>Informal staff and Inmate Conversations</p> <p>The Clarinda Correctional Facility and Iowa Department of Corrections (IDOC) has taken 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. These steps include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. This Auditor reviewed written materials in Spanish and verified staff interpreters were available throughout the Agency to ensure effective communication with inmates who speak limited English. The facility use a system called Language Link to assist with various language translations.</p> <p>Inmates with physical disabilities and who have intellectual disabilities, limited reading skills, or who are blind or have low vision are also given the same programming opportunities and access to the facilities efforts to prevent, detect, and respond to sexual assault and sexual harassment. I confirmed the use of staff interpreters as well as the use of language link service during random inmate interviews and informal staff conversations; The facility never uses inmate interpreters. This Auditor interviewed two inmates who were hard of hearing and verified they are allowed to speech-read all information provided to them. Several targeted population inmates interviewed confirmed they had received the PREA education and had no problems with obtaining the PREA information during the intake process. All targeted inmates could explain the zero-tolerance policy, knew how to properly report an allegation of sexual abuse, and knew what behavior was considered inappropriate and what behavior is considered sexual abuse.</p> <p>After careful and detailed review of all the information this Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>



Evidence relied upon to make Compliance Determination:

IDOC Policy and Document Review

Pre-Audit Questionnaire Responses

IDOC PREA Policy

Specialty Staff Interview Notes

Informal Conversations with Staff

Staff File Reviews

Site Review Observations

The Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility as an Agency has not hired or promoted 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 lock up institution. IDOC has not enlisted the 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 lock up institution. IDOC has not hired or promoted or used the services of anyone 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; or has been civilly or administratively adjudicated to have engaged in the activity as described.

The IDOC PREA Policy prohibit the facility/Agency from hiring, promoting or during business with a person or business who may have contact with inmates who has engaged in or attempted to engage in sexual abuse while in incarcerated, or convicted of, civilly or administratively of the same.

The Auditor verified this by reviewing a new hire applicant packet as well as reviewing multiple personnel files that included criminal background checks and self-disclosure forms. During my personnel file review I found this same process of checking backgrounds is also completed when starting new vender contracts and when qualifying staff for in-house promotions.

Before hiring new employees, who may have contact with inmates, the Agency (1) Performs a criminal background records check; and (2) 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.

The Agency also conducts criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. This is accomplished by Human Resource staff conducting National Crime Information Center (NCIC) checks on all facility staff hire anniversary date. The current policy also requires that staff self-disclose new information related to sexual conduct behavior.

	<p>Failure to self-disclose new sexual conduct behavior are grounds for termination. Finally, through policy the facility/Agency has an obligation to report sexual conduct behavior to other institutional employers. These processes were verified through interviews with local human resources staff and PREA Coordinator and informal conversation with random staff.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Informal Conversations with Staff</p> <p>The Clarinda Correctional Facility (CCF) have added new camera or video equipment and according to current policy when they do add new camera or video equipment the Agency with the facility input will consider the effect of the modification upon the agency's ability to protect inmates from sexual abuse. Clarinda Correctional Facility is currently in the process of building a kitchen and laundry area within the secured perimeter, but it is not yet complete. The facility is also in the process of receiving a new roof on the main building but is not yet completed. Both these projects considered the safety and security of inmates in its design and placement of video and camera equipment.</p> <p>Through interviews with facility leadership, I confirmed that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the facility always considers how such technology will enhance the facilities ability to protect inmates from sexual abuse. This Auditor verified this information with random informal mid-level staff interviews.</p> <p>After careful and thoughtful review of all the information, the Auditor determined the facility meets this standard.</p>

115.21	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Random Staff Interview Notes</p> <p>The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) has current PREA Policy, that dictate the Agency is responsible for investigating allegations of sexual abuse, the Agency will follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. The Agency is responsible for administrative and criminal sexual assault investigations. This was verified through an interview with lead investigator at the facility. After reviewing the Agency protocol the Auditor determined it is appropriate for youth and meets national standards as stated by the lead investigator.</p> <p>The Clarinda Correctional Facility always offers inmate victims of sexual abuse access to forensic medical examinations outside the facility, without financial cost, when medically appropriate. There is currently a Memorandum of Understanding (MOU) with Catholic Charities Advocacy Agency to provide victim services. If SAFE's or SANES cannot be made available, the forensic examination is performed by other qualified medical practitioners at the local hospital Regional Health Centers. This Auditor reviewed and verified the memorandum of understanding. This was confirmed through formal and informal interviews and provided documentation.</p> <p>When a crisis center advocate is not available to provide victim advocate services, the facility makes available to provide these services a qualified staff member from a community-based organization, or a qualified Agency/facility staff member. During the onsite phase of the audit, the auditor interviewed the PREA Compliance Manager; They confirmed the institution's MOU with an outside agency to provide victim advocacy services for offenders/inmates. When unavailable the institution utilizes an Offender Victim Representative (OVR). The OVR is a staff member trained in dealing with sexual abuse victims. This was further acknowledged through targeted and random inmate interviews.</p> <p>If requested by the offender/inmate victim, the victim advocate, qualified agency staff</p>

	<p>member, or qualified community-based organization staff member does accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.</p> <p>After careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Investigation Case Reviews</p> <p>Website Review</p> <p>Targeted Inmate Interview Notes</p> <p>Community Advocacy Questionnaire</p> <p>Informal Conversations with Staff and Inmates</p> <p>The Clarinda Correctional Facility and Iowa Department of Corrections (IDOC) ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment accusations. This was confirmed through an interview with the facility lead investigator and the review of current policies, IDOC PREA Policy and informal conversations with staff and inmates.</p> <p>The Auditor could not find any investigative reports or grievances related to sexual abuse or sexual harassment that were not investigated properly. There were 29 allegations that were investigated within the last 12 months. The facility has a policy that governs the investigative process to ensure that all allegations of sexual abuse or sexual harassment are investigated with the legal authority to conduct criminal investigations and administrative investigations of sexual abuse or sexual harassment in prisons or jails. All the 29 cases within the last 12 months were all investigated administratively as required by IDOC policy. The PREA Compliance Manager and PREA Coordinator confirmed that there are policies that mandate the</p>

	<p>investigation of sexual abuse and sexual harassment allegations at the IDOC. All criminal investigations are performed by the Department of Investigative Services DIS. The agency publishes this information on its website. The auditor verified this information by reviewing the IDOC website and conducting informal conversations with random staff.</p> <p>After careful and detailed review of the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Random Staff Interview Notes</p> <p>Staff Training Records</p> <p>Site Review Observations</p> <p>The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) has trained all new or transferred in employees who may have contact with inmates on: (1) Its zero-tolerance policy for sexual abuse and sexual harassment; (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; (3) Inmates' rights to be free from sexual abuse and sexual harassment; (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; (5) The dynamics of sexual abuse and sexual harassment in confinement; (6) The common reactions of sexual abuse and sexual harassment victims; (7) How to detect and respond to signs of threatened and actual sexual abuse; (8) How to avoid inappropriate relationships with inmates; (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. This policy and practice were verified by interviewing multiple random staff and all being very familiar with all the training topics and were able to recall the approximate last time they were trained. The Pre-Audit Questionnaire responses also</p>

	<p>indicated all staff receive the mentioned training. Some newer staff had laminated cards that outlined the first responder response.</p> <p>All current employees at IDOC receive in-service e-training annually to ensure that all employees know the Agency's current sexual abuse and sexual harassment policies and procedures. The annual in-service training is in addition to all new employee PREA training, the agency updates this training yearly on current sexual abuse and sexual harassment policies. This training is tailored to for male offenders/inmates because the facility does not house female inmates. All training is electronically documented in the employees training records. I reviewed 10 staff training records, and all had documented completion of the initial sexual abuse and sexual harassment prevention training. All random staff interviewed recalled receiving the training. These practices were further verified through interviews with the Warden, PREA Compliance Manager and PREA Coordinator.</p> <p>After careful and detailed review, this Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.32</b>	<b>Volunteer and contractor training</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Volunteer/Contractor Training Records</p> <p>Volunteer/Contractor Interview Notes</p> <p>The Clarinda Correctional Facility ensures that all volunteers and contractors who have contact with inmates are trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Multiple interviews were conducted with contractors and volunteers, and all recalled receiving the sexual assault and sexual harassment prevention training through an e-learning system.</p> <p>Specifically, two volunteers and two contractors who have contact with inmates, were interviewed and asked directly if they were notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report</p>

	<p>such incidents; they all indicated they completed the PREA training online within the e-learning program format. The level and type of training provided to volunteers and contractors varies depending on the level of contact with the inmate population. The Auditor reviewed some signed and some computer-generated completion records documentation confirming that volunteers and contractors understood the training they had received. This PREA re-training is completed annually online and includes an assessment. I validated the training further with informal conversations with staff and volunteer file reviews.</p> <p>After careful and detailed review of all information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.33</b>	<b>Inmate education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Inmate File Reviews</p> <p>Informal Conversations with Staff and Inmates</p> <p>Random Inmate Interview Notes</p> <p>Site Review Observations</p> <p>CCF Intake Packet</p> <p>During the intake process at the Clarinda Correctional Facility (CCF) inmates receive information explaining the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment, this information is in the inmate handbook. The auditor reviewed an intake packet which included an inmate handbook to ensure the basic PREA safety information was included. This was further confirmed during the inmate and random staff interviews. I further verified this by reviewing inmate files and ensuring that the Zero Tolerance Acknowledgment for Offenders Forms were in the files and signed by the inmates. The inmates receive an in-depth orientation at which time the facility provides education on the Prison Rape Elimination Act. This was confirmed during the leadership staff interviews and the informal inmate conversations. This orientation</p>

	<p>takes place within seven days of arriving at the facility.</p> <p>The Clarinda facility provides inmate education in formats accessible to all inmates, this includes inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility provides materials to inmates in Spanish, they also have designated staff within the agency and at the facility who can provide interpretation of other languages. The facility also has access to language link for additional translation services.</p> <p>The Clarinda Correctional Facility has all key information on the zero-tolerance policy and reporting avenues provided through signage and pamphlets placed throughout the facility. I viewed the signage and reviewed the pamphlets during the facility site review. The Auditor further confirmed that the signage had been in place prior to the audit during the inmate and staff interviews.</p> <p>After careful and detailed review of all information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Investigator Training Records</p> <p>Informal Conversations with Staff</p> <p>In addition to the general training provided to all employees pursuant to § 115.31, the Clarinda Correctional Facility and the Iowa Department of Corrections (IDOC) Agency maintains that its investigators have received training in conducting such investigations in confinement settings. The Agency policy is written according to the standard.</p> <p>The Agency is responsible for both the administrative and criminal investigations of all sexual abuse and sexual harassment incidents. The Department of Investigative Services (DIS) are central office investigators and are trained in conducting criminal investigations. The DIS investigators work for and report to the Iowa Department of Corrections Agency. The Auditor interviewed the facility investigator and the PREA</p>



	<p>Compliance Manager (PCM) during the onsite phase of the audit. The PCM confirmed that they had taken the investigators training course provided by the Department and had successfully received the certificate. The investigator was able to recite all points from this provision and told the Auditor it was included in the training. The Auditor reviewed training records and verified completion of the online course provided by the Department. The training they have received includes the use of techniques for interviewing sexual abuse victims, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. This was confirmed during an interview with the PREA Compliance Manager and a review of the master training list.</p> <p>I reviewed all documents verifying the specialized training attended by the investigators; this was confirmed during the interviews with the PCM. All the Agency investigators are certified and have received extensive training in conducting investigations. The investigators have also attended specific training courses on sexual abuse investigation.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of the standard.</p>
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<b>115.35</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>Medical Staff Training Certificates</p> <p>The Clarinda Correctional Facility (CCF) and the Iowa Department of Corrections (IDOC) Agency ensures that all full and part-time medical and mental health care practitioners who work regularly in its facilities are trained in: (1) How to detect and assess signs of sexual abuse and sexual harassment; (2) How to preserve physical evidence of sexual abuse; (3) How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and (4) How and to whom to report</p>

	<p>allegations or suspicions of sexual abuse and sexual harassment. I confirmed this training with the medical and mental health staff during interviews. The Agency policy is written in accordance with the standard.</p> <p>The medical staff at Clarinda Correctional Facility do not conduct sexual assault or forensic medical examinations onsite. All forensic medical examinations are conducted at the Clarinda Health Center. The medical and mental health care practitioners receive the training mandated for employees under § 115.31 or for contractors under § 115.32, depending upon the practitioner's status at the agency. IDOC and Clarinda Correctional Facility maintains all documentation that medical and mental health practitioners have received the training referenced in this standard either from the Agency or elsewhere.</p> <p>The Clarinda Correctional Facility is providing this specialized training on a yearly basis to all medical and mental health care practitioners. I confirmed this while interviewing the medical supervisor and through informal conversations with medical and mental health practitioners and a review of the training records and certificates.</p> <p>After a careful and detailed review of all information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Random Inmate Interview Notes</p> <p>Informal Conversations with Staff and Inmates</p> <p>Inmate File Reviews</p> <p>Site Review Observations</p> <p>Site Protocol Testing</p> <p>The Clarinda Correctional Facility (CCF) adheres to a policy that aligns with established standards. This policy mandates that the facility conduct assessments of</p>

all inmates during the intake screening process and upon transfer to another facility to evaluate their risk of being sexually abused by other inmates or exhibiting sexually abusive behavior towards others. The Auditor has confirmed the existence of this policy.

The intake screening process evaluates several factors, including, but not limited to: (1) the inmate's perception of vulnerability; (2) the inmate's age; (3) the inmate's physical build; (4) whether the inmate has prior incarceration experience; (5) whether the inmate's criminal history is exclusively nonviolent; (6) any prior convictions for sexual offenses against adults or children; (7) the inmate's sexual orientation or gender identity, including whether they are perceived as gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (8) any prior experiences of sexual victimization; (9) the existence of any mental, physical, or developmental disabilities; and (10) whether the inmate is detained solely for civil immigration purposes. The auditor reviewed the screening tool to ensure its objectivity. This tool requires a straightforward yes or no response to each question, and its scoring system is uniformly applied to all inmates screened. Since the screening tool does not permit subjective responses, it is deemed objective, as verified through interviews and a review of randomly selected inmate files.

An examination of 15 inmate files indicated that screenings were completed on the day of arrival at the facility. The Auditor also interviewed the PREA Compliance Manager about the risk screening process and confirmed that assessments for all inmates occur within mere hours of their arrival on the day of intake.

The Clarinda Facility reassesses all inmates within 30 days of their arrival. This reassessment is carried out by counselor staff, who consider all relevant information available at the time of the evaluation. This process was validated through a review of reassessment documentation and staff interviews. Additionally, inmates are reassessed when circumstances arise that warrant further evaluation due to a referral, request, incident of sexual abuse, or the acquisition of new information that could affect the inmate's risk of sexual victimization or abusiveness. This was corroborated during staff interviews and multiple reviews of inmate files.

Inmates are informed during the screening process that they will not face disciplinary action for refusing to answer questions or for not providing complete information. All inmates have the freedom to choose whether to respond. Staff members are encouraged to motivate inmates to answer questions by explaining that the information contributes to their safety. This practice was confirmed through an examination of the screening forms as well as during formal and informal interviews with staff and inmates.

During staff interviews and informal discussions with classification/counselor staff, I learned that access to the intake self-assessment forms is restricted to those staff members who require the information, such as the PREA Compliance Manager and supervisors. If an inmate is identified as high-risk during the initial assessment, they are promptly referred to mental health services for further screening and support.

After conducting a thorough and detailed review of all relevant information, the

	Auditor concluded that the facility complies with the requirements of the standard.
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<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Informal Conversations with Staff Inmates</p> <p>The Clarinda Correctional Facility (CCF) conducts screenings for every inmate upon their arrival at the facility. These screenings are called Sexual Violence Propensity (SVP) assessments. This assessment information is used to guide decisions regarding housing, bed assignments, work, education, and program placements. The aim is to separate inmates at high risk of sexual victimization from those likely to engage in sexual abuse. The PREA Coordinator confirmed that there is no consent decree in place; instead, inmates are individually screened and housed. This was corroborated by a review of the policy, which adheres to established standards. I further verified these procedures through protocol testing, interviews with staff and random inmates.</p> <p>The Iowa Department of Corrections (IDOC) does not assign lesbian, gay, bisexual, transgender, or intersex (LGBTI) inmates to dedicated facilities, units, or wings solely based on their identity or status, unless such placements are mandated by a consent decree, legal settlement, or court ruling designed to protect these inmates.</p> <p>The Clarinda Correctional Facility effectively screens inmates before assigning them to cells. Using the information gathered from screenings and inmate self-disclosure forms, the facility can make safe cell assignments for all high-risk inmates, including those who identify as LGBTI. During the on-site phase of the audit, the auditor interviewed the PREA Compliance Manager, who also oversees inmate risk screenings. When asked about how the agency utilizes the risk screening information, they explained that the scores for victimization and abusive behavior risks are entered into the classification system. This system helps ensure that inmates with differing risk scores are not housed together. The Clarinda Correctional Facility is committed to maintaining the necessary separation for safety. Housing decisions are made on an individual basis and are based on the risk screening scores, affecting not</p>

	<p>only inmate housing but also their job assignments and program participation. I confirmed this process through interviews with random inmates, informal discussions with staff, and specialized staff interviews.</p> <p>LGBTI inmates are reassessed as necessary, with a minimum of biannual assessments conducted. This fact was verified through interviews with specialized staff, random inmate interviews, and reviews of facility policy and inmate files.</p> <p>After a thorough and detailed review of all relevant information, the auditor concluded that the facility complies with the requirements of this standard.</p>
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<b>115.43</b>	<b>Protective Custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Informal Conversations with Staff and Inmates</p> <p>Site Review Observations</p> <p>The Clarinda Correctional Facility (CCF) and the Agency maintain a protective custody policy that aligns with this standard. According to the policy, no high-risk inmates who are at risk of sexual abuse will be placed in segregated housing unless an assessment reveals that all alternative housing options are inadequate to separate the alleged abuser from the potential or alleged victim. During the onsite phase of the audit, the Auditor interviewed the Warden, who confirmed that involuntary segregation is employed at the Clarinda Correctional Facility to protect inmates at risk of victimization only when other means are not available. Inmates at CCF are only placed in restricted housing when no other options are available. The Auditor corroborated this information through informal discussions with staff and inmates.</p> <p>Over the past 12 months, the Clarinda Correctional Facility has not had to place any high-risk inmates in involuntary segregation due to being at risk of sexual victimization.</p> <p>After a thorough review of all the information, the Auditor concluded that the facility meets the requirements of the standard.</p>

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Random Staff Interview Notes</p> <p>Site Review Observations</p> <p>Site Protocol Testing</p> <p>Random Inmate Interview Notes</p> <p>Informal Conversations with Staff and Inmates</p> <p>Third Party Letter Reviews</p> <p>The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) offer inmates several private ways to report sexual abuse, harassment, retaliation, or staff neglect. Inmates can write letters, request meetings with staff or unit supervisors, or contact the Ombudsman Office or Director of the Victim and Restorative Justice Center. Information is posted throughout the facility and included in the IDOC Offender Handbook and Sexual Abuse Awareness Brochure.</p> <p>Auditor onsite observations confirmed the presence of zero-tolerance signs in English and Spanish, detailing reporting methods. Interviews with the PREA Compliance Manager and Coordinator confirmed the Ombudsman Office as an external reporting agency. Random inmate interviews revealed all knew how to report allegations, often mentioning direct reports to staff.</p> <p>Family, third parties, and staff can also report abuse through the IDOC website, ensuring anonymity upon request. Staff interviews showed they are trained to accept and document verbal, written, anonymous, and third-party reports promptly.</p> <p>After reviewing all information, the Auditor concluded that the facility meets the standard requirements.</p>

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
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	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Inmate Grievance Reviews</p> <p>Informal Conversations with Staff and Inmates</p> <p>Site Review Observations</p> <p>The Clarinda Correctional Facility (CCF) has ensured all provisions of this standard are comprehensively covered in the Agency's Inmate/Offender Grievance Process. The auditor reviewed this policy; during this review, the auditor also questioned staff regarding their understanding and implementation of the procedure, specifically in the context of grievances related to sexual abuse. The staff demonstrated a clear understanding of the process and were well-versed in the steps to take if an inmate were to file such a grievance. According to policy the grievance process is not used for sexual abuse or sexual harassment incidents however, if an offender filed a grievance related to sexual abuse or sexual harassment they are sent to the Inspector General's Office for investigation. This information was corroborated through interviews with staff and inmates, as well as a supporting documentation from the facility.</p> <p>Furthermore, the inmates interviewed were aware of their rights and the process to file a grievance concerning operational concerns versus sexual abuse or sexual harassment concerns. Many offenders expressed a preference for utilizing other reporting avenues available to them such as reporting anonymously or directly to a staff member. This suggests that while the grievance process is known and understood, inmates feel more comfortable or find it more effective to report through different channels such as talking to a trusted staff member. Staff interviewees confirmed their awareness of their duty to forward information related to PREA or sexual abuse or sexual harassment directly to the PREA Compliance Manager. They also emphasized their commitment to reporting incidents immediately as required by policy and ensuring timely and appropriate responses to any allegations of sexual abuse.</p> <p>After a meticulous review of all the relevant documentation and a comprehensive analysis of the information obtained through interviews at the facility level, I have concluded that the facility does meet the requirements of this standard.</p>

115.53	<b>Inmate access to outside confidential support services</b>
	<p data-bbox="256 185 959 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="256 264 544 297"><b>Auditor Discussion</b></p> <p data-bbox="256 342 1074 376">Evidence relied upon to make Compliance Determination:</p> <p data-bbox="256 409 746 443">IDOC Policy and Document Review</p> <p data-bbox="256 488 754 521">Pre-Audit Questionnaire Responses</p> <p data-bbox="256 566 507 600">IDOC PREA Policy</p> <p data-bbox="256 633 695 667">Specialty Staff Interview Notes</p> <p data-bbox="256 701 715 734">Random Inmate Interview Notes</p> <p data-bbox="256 779 719 813">Targeted Inmate Interview Notes</p> <p data-bbox="256 857 619 891">Site Review Observations</p> <p data-bbox="256 925 898 958">Informal Conversation with Staff and Inmates</p> <p data-bbox="256 992 743 1025">Community Partner Contact Notes</p> <p data-bbox="256 1059 1473 1473">Offenders within the Clarinda Correctional Facility (CCF)/Iowa Department of Corrections (IDOC) have access to confidential support services, which are outlined in the Agency's policies and procedures and IDOC PREA Policy. In the inmate handbook, on bulletin boards and available through counselors' details about the available support services are clearly laid out. Currently, IDOC has an active Memorandum of Understanding (MOU) with the Catholic Charities Domestic Violence Intervention Program. Inmates have access to write a letter or make an unmonitored phone call to Catholic Charities. Additionally, there are trained staff inmate victim representatives in the facility. This was verified through interviews with targeted inmates, random inmates and random staff.</p> <p data-bbox="256 1507 1465 1709">When sexual abuse incidents occur, inmates receive support equivalent to what they would receive in the community. This consistency ensures that their needs are met regardless of their circumstances. Follow-up mental health care is available for both victims and abusers involved in incidents. These services are provided at no cost to the victim.</p> <p data-bbox="256 1742 1469 2078">The PREA Compliance Manager takes the responsibility of informing inmates about communication monitoring during orientation. They clarify the extent to which communications will be observed and how reports of abuse will be handled in accordance with mandatory reporting laws. This transparency helps maintain trust and ensures that inmates are aware of the process. This orientation process was verified through formal and informal conversations with inmates and staff. Many inmates interviewed were aware of outside services but had never wanted or needed to use the services.</p>



	<p>IDOC PREA Policy states, if a rape crisis center is not able to provide the offender with victim advocate services, the facility will make available a qualified staff member from a community-based organization. If a qualified staff member from a community-based organization is not able to provide the offender with victim advocate services, the facility will make available a qualified IDOC staff member to provide the offender with victim advocate services. Through secure mail and telephone access, it remains confidential whether inmates reach out to the agency. Privacy is respected, and inmates can choose whether to utilize these services. I tested the confidentiality of the advocate contact process while discussing the mail routing procedures. The auditor contacted the advocacy agency Catholic Charities and verified the working relationship with the facility. The spokesperson for Catholic Charities emphasized their advocacy agency is all confidential. The offender/victim must give permission before information is shared, except in specific mandatory reporting situations.</p> <p>After a thorough review of documentation and interviews conducted, I found that the facility complies with the requirements of this standard and all associated provisions.</p>
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115.54 Third-party reporting	
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Informal Conversations with Staff and Inmates</p> <p>IDOC Website Review</p> <p>Third Party Test Verification</p> <p>The Clarinda Correctional Facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment within the facility. The procedures are written in accordance with standard allowing inmates and other outsiders to report incidents on behalf of other inmates. This is described in the IDOC PREA Plan. The Agency's website provides clear instructions for third-party reporting, which were verified via receipt of a response to a test letter sent by the auditor.</p> <p>Throughout the Clarinda Correctional Facility there are posters in areas such as:</p>

	<p>inmate living units, medical, program areas, intake, visitation, and reception areas regarding third-party reporting and the address required to file the complaint. The inmates are provided an address to contact the Office of the Ombudsman and the Victim and Restorative Justice Center; this information is posted on the PREA intake pamphlet, inmate handbook, PREA video, and signs posted near the inmate information bulletin boards.</p> <p>Multiple inmate interviews indicated knowledge of the third-party reporting methods and inmates advised they felt comfortable reporting all allegations of sexual misconduct via third party. Furthermore, the facility prominently displays signage for third-party reporting avenues in areas accessible to visitors. This was verified through interviews with the PREA Compliance Manager, informal conversations with staff and inmates, observations during the site review and review of facility website.</p> <p>After a thorough examination of all documentation and information gathered during facility interviews, it was determined that the facility meets all the requirements of this standard.</p>
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115.61	Staff and agency reporting duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Informal Conversations with Staff and Inmates</p> <p>Random Staff Interview Notes</p> <p>Investigative Reports Reviews</p> <p>The Clarinda Correctional Facility (CCF) requires 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; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation, as evidenced by protocol testing, the site review checklist and interviews with random staff.</p>

	<p>Apart from reporting to designated supervisors or officials, CCF staff will not reveal 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, as evidenced by policy and interviews with random staff.</p> <p>Medical and mental health practitioners are required to report sexual abuse pursuant to state law or policy requirements and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services, as evidenced by interviews with medical and mental health staff.</p> <p>During interviews with the Warden and PREA Coordinator, it was verified this facility does not house offenders younger than 18 years of age.</p> <p>The Clarinda Correctional Facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators, as evidenced by investigation policy discussions, investigative file reviews and informal conversations with the Warden.</p> <p>Based on the evidence presented, the facility is compliant with this standard.</p>
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<b>115.62</b>	<b>Agency protection duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Random Staff Interview Notes</p> <p>When the Clarinda Correctional Facility (CCF) staff learns that an offender/inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate, as evidenced by policy, IDOC PREA Policy and interviews with the Agency Head Designee, the Warden and random staff. As notated by the pre-audit questionnaire responses, the facility has not had to initiate this policy within the last 12 months, that an inmate was subject to a substantial risk of imminent sexual abuse. The staff interviewed however, understood their responsibility and all random staff interviewed responded that they would immediately take appropriate steps to</p>

	<p>protect the inmate no matter the circumstances. Informal conversations with inmates also revealed inmates were comfortable that staff would act upon reporting an imminent risk of sexual abuse incident.</p> <p>After a review of all information the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>When the Clarinda Correctional Facility (CCF) receives notification of an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation promptly informs the appropriate head of the facility or office within the agency where the alleged abuse occurred. This process is confirmed through existing policies and interviews with the Agency Head Designee, the Warden, and various staff members. The Warden indicated that any notification from an outside agency would be immediately forwarded for investigation. Additionally, the Agency Head clarified that external notifications are referred without delay to the Department of Investigative Services (DIS) for investigation, just as with any other allegation.</p> <p>The Warden of the facility or the relevant agency office that receives such notifications ensures that the allegations are investigated in accordance with established standards, as evidenced by policy documentation and the IDOC PREA Policy review, alongside interviews with the Agency Head Designee and the Warden. These notifications are executed as quickly as possible, but not later than 72 hours after the receipt of the allegation, as supported by policy review.</p> <p>After a thorough and meticulous review of all relevant information, the Auditor concluded that the facility complies with the requirements of this standard.</p>

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Targeted Inmates Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Random Staff Interview Notes</p> <p>The Clarinda Correctional Facility (CCF)/Iowa Department of Corrections (IDOC) has a policy in practice indicating the first responder duties to include a security and non-security staff response when responding to a sexual abuse incident. 1) Separate the alleged victim and abuser; (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and (4) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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 first staff responder is not a security staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff, as evidenced by policy reviews, interviews with 12 random staff, with many who were first responders.</p> <p>Based on the evidence provided by the Clarinda Correctional Facility staff it has a procedure and IDOC PREA Policy governing the staff first responder duties to include a security and non-security staff response. The policy mandates the four-step action plan previously mentioned within the body of the narrative. The Auditor completed many random interviews formal and informal to include the PREA Compliance Manager, first responders and supervisory staff, all indicating they understood the requirements of this standard.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>

<b>115.65</b>	<b>Coordinated response</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>The Clarinda Correctional Facility (CCF) has developed a written institutional Policy; the Incident Response Policy, to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership, as evidenced by the reviewed documentation provided and an interview with the Warden and other facility leadership. This procedure was laminated on the housing unit officer desk as a quick reference during an emergency.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Collective Bargaining Agreements</p>

	<p>The State of Iowa recognizes collective bargaining. The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) has a collective bargaining agreement with the State of Iowa, UE Local 893, Iowa United Professionals. This agreement does not prevent the agency from removing alleged staff sexual abusers from inmate contact during investigations or pending disciplinary decisions.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Informal Conversations with Staff and Inmates</p> <p>Site Review Observations</p> <p>The Iowa Department of Corrections (IDOC) and the Clarinda Correctional Facility (CCF) have implemented a policy and a IDOC PREA Policy to safeguard all inmates and staff who report incidents of sexual abuse or sexual harassment, or who cooperate with investigations regarding these matters. This policy aims to protect individuals from retaliation by other inmates or staff members. Responsibilities for monitoring retaliatory actions will be assigned to specific staff members or departments, as supported by facility policies and interviews with staff.</p> <p>The Clarinda Correctional Facility (CCF) /IDOC has adopted various protective measures, including housing transfers for victimized inmates or alleged abusers, the removal of suspected staff or inmate abusers from contact with victims, and the provision of emotional support services for those who may fear retaliation for reporting sexual abuse or harassment. These actions are corroborated by reviews of investigative files and interviews with the Agency Head Designee, the Warden, designated staff responsible for monitoring retaliation, and inmates who have reported such abuses.</p> <p>For a minimum of 90 days following a report of sexual abuse, the facility will monitor</p>

	<p>the conduct and treatment of both the reporting inmates or staff and the alleged victims. This monitoring is intended to identify any changes that might indicate possible retaliation by inmates or staff, and the facility will take swift action to address any identified instances of retaliation. If initial monitoring suggests a continuing need for oversight, the facility will extend the monitoring period beyond 90 days, as indicated by policy documents, data from retaliation monitoring, and interviews with the Warden and designated staff responsible for these efforts.</p> <p>For inmate-related cases, monitoring will also include periodic status checks, supported by data gathered during the retaliation monitoring process and interviews with designated staff. If any individual cooperating with an investigation expresses concern about possible retaliation, the facility is prepared to implement appropriate protective measures, as demonstrated by interviews with the Agency Head Designee, the Warden, and various staff members. The Auditor has confidence in the staff's understanding of how to implement the necessary procedures when the situation arises.</p> <p>After a thorough review of all relevant information, the Auditor has concluded that the facility complies with the established standards.</p>
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Targeted Inmate Interview Notes</p> <p>Informal Conversations with Staff and Inmates</p> <p>Site Review Observations</p> <p>Iowa Department of Corrections (IDOC) policy states the use of segregated housing by the Clarinda Correctional Facility (CCF) to protect an inmate who is alleged to have suffered sexual abuse is subject to the requirements of PREA standard 115.43, as evidenced by review of policy and interviews with the Warden and staff who supervise segregated housing.</p> <p>The IDOC PREA Policy and the Short-Term Restricted Housing Policy address the use of</p>



	<p>restricted or segregated housing at Clarinda Correctional Facility and throughout IDOC. The policy states that this status is reserved for offenders who are placed in restrictive housing on a temporary basis pending the outcome of a formal investigation related to allegations of sexual abuse, sexual harassment. The policy ensures confinement in restrictive housing shall be in accordance with the appropriate confinement procedures for the offender's specific category of restrictive housing. Random staff were informally questioned about the Short-Term Restricted Housing Policy and staff working within this unit were able to articulate the policy practices.</p> <p>Facility leadership indicated in the pre-audit questionnaire there have been no inmates involuntarily segregated following the report of a sexual abuse allegation over the last 12 months. This was further verified through informal conversations with staff that no inmates were placed in involuntarily segregation following the report of a sexual abuse allegation over the last 12 months.</p> <p>It was also stated by the Warden during an interview no inmates have been placed in segregated housing who alleged to have suffered sexual abuse. The auditor reviewed the short-term housing logs and verified the policy procedures are being implemented.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Investigative Case Reviews</p> <p>Informal Conversations with Staff</p> <p>Targeted Inmate Interview Notes</p> <p>Site Review Observations</p> <p>Investigator Specialized Training Records</p>

	<p>The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) operating procedure is written in accordance with the standard and states that all investigations into allegations of sexual abuse and sexual harassment will be done promptly, thoroughly, and objectively for all allegations, including third party and anonymous reports. Policy and IDOC PREA policy require that the Agency conduct both administrative and criminal investigations of sexual abuse and harassment. The policy requires that investigations are responded to promptly. Clarinda Correctional Facility investigates all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports administratively. The Department of Investigative Services (DIS) is an internal investigative department within the IDOC that conducts all criminal investigations. The provided policy requires administrative investigations to include efforts to determine whether staff actions or failure to act contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings.</p> <p>The DIS is notified immediately upon the facility learning of the allegation. Immediate steps are taken to preserve evidence upon learning of the allegation and initiating the investigation. The investigation process for third-party allegations is the same.</p> <p>The PREA Compliance Manager and other facility investigators all appear knowledgeable in conducting sexual abuse and sexual harassment investigations in accordance with the elements of the standard. All IDOC investigators have received specialized training in conducting sexual abuse investigations in confinement settings. The auditor reviewed all training certificates provided to confirm the specialized type of training received.</p> <p>If an allegation is reported anonymously, the Investigators stated the investigation would be handled the same as any other investigation. Investigative staff indicate they would continue an investigation even if an inmate is released or a staff member terminates employment during the investigation. The lead facility investigators and PREA Compliance Manager stated that they will complete each investigation all the way thru, even when the involved parties leave employment or are released or transferred. All investigative files were reviewed for content and policy compliance.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p>

	<p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>The Clarinda Correctional Facility (CCF) and Iowa Department of Corrections (IDOC) PREA policy is written in compliance with the requirements of the standard and imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. It was confirmed through multiple staff interviews that Clarinda Correctional Facility leadership or investigators imposes no standard higher than preponderance of the evidence in making determinations. This is documented as a section of the investigator training, which all designated investigators have completed.</p> <p>The PREA Compliance Manager and other investigators were able to articulate what preponderance meant and how they arrive at the basis for their determinations. This was confirmed by reviewing policy and interviewing one investigator and the PREA Compliance Manager. All investigative files were reviewed for policy compliance.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>Investigative Case Reviews</p> <p>Targeted Inmate Interview Notes</p> <p>The Iowa Department of Corrections (IDOC) /Clarinda Correctional Facility (CCF) operating procedure is written in accordance with the standard and requires an</p>

	<p>inmate be notified when a sexual abuse allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation. When a staff member has committed sexual abuse against an offender, unless the determination is unfounded, the PREA Compliance Manager or investigator informs the offender whenever: the allegation has been determined to be unfounded; the allegation has been determined to be unsubstantiated; the staff member is no longer posted within the offender's unit; the staff member is no longer employed at the facility; the facility learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or the facility learns that the staff member has been convicted on a charge related to sexual abuse within the facility. This was confirmed by reviewing the PREA policy and through multiple interviews with Clarinda Correctional Facility leadership. The Warden indicated that inmates are always informed of the results of an investigation at its conclusion. Subsequent onsite conversations with the facility leadership reaffirmed the inmate notification process.</p> <p>Policy and IDOC PREA policy dictate that the inmate will be notified by the PREA Compliance Manager or investigator. When an offender has alleged sexual abuse by another offender, the PREA Compliance Manager or investigator informs the offender whenever: the allegation has been determined to be unfounded; the allegation has been determined to be unsubstantiated; the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the administration learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. This was corroborated by conducting informal conversations with staff and random inmates. The random inmates were able to recall the policy and some specific requirements of the policy. The staff were knowledgeable about the notification requirements.</p> <p>Clarinda Correctional Facility reported 29 notifications were completed within the last 12 months. Several random inmates also confirmed that notifications occur at the end of investigations. The Agency is responsible for both administrative and criminal investigations notifications. The auditor reviewed all investigative files for content and policy compliance.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p>

	<p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Informal Conversations with Staff</p> <p>The Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility (CCF) disciplinary policies comply with this standard. Staff violating sexual abuse or harassment policies face sanctions, up to termination. Policy mandates termination for those responsible for inmate sexual abuse. Those violating related policies face discipline based on the act's nature, circumstances, and previous disciplinary history.</p> <p>IDOC informs law enforcement and licensing bodies about criminal violations by staff. Resignations in lieu of terminations are reported unless the activity was not criminal. The Agency's policy requires notifying relevant bodies of such terminations or resignations.</p> <p>The Warden confirmed one staff termination in the past year, citing zero tolerance for sexual misconduct. Staff interviews corroborated awareness of disciplinary actions and serious consequences for PREA policy violations, including termination and prosecution.</p> <p>The Auditor concluded that the facility meets compliance standards.</p>
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115.77	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Volunteer and Contractor Interview Notes</p> <p>The Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility (CCF) PREA and disciplinary policies and practices were reviewed and are in line with the requirements of the standard. Policy stipulates that contractors and volunteers who violate the sexual abuse or sexual harassment policies are prohibited from having contact with offenders/inmates and will have their entrance privileges revoked. The disciplinary sanctions for volunteers or contractors are like those of the disciplinary sanctions for staff members. Policy states if there is an investigation and the</p>

	<p>individual is determined to have committed acts of sexual abuse or sexual harassment, the case will be referred for criminal prosecution and to any relevant licensing bodies. Additionally, the Agency will take measures to prevent contact from the volunteer or contractor with any offender within the IDOC system.</p> <p>The Clarinda Correctional Facility leadership reported via the pre-audit questionnaire that in the past 12 months, there have been no instances where volunteers or contractors have engaged in sexual abuse and were reported to outside law enforcement agencies. Although one contractor was removed from the facility for alleged sexual harassment; the case was investigated and determined not criminal and therefore not referred to an outside law enforcement agency.</p> <p>Targeted interviews with contract staff verified that they consider a violation of the PREA policy to be of sufficient seriousness to warrant termination from the facility. The contract staff were aware that the Agency has a zero-tolerance policy regarding sexual abuse and any such incidents would be investigated and reported to the appropriate agency for prosecution, if necessary. The Auditor conducted in-person interviews with two volunteers and two education contractors. The volunteers and contractors all stated they had received training on the PREA rules and were aware of the agency's zero tolerance policy.</p> <p>Volunteers and contractors are made aware of the facility's sexual abuse and sexual harassment policies during their initial training and orientation prior to providing services in the facility. Each volunteer and contractor complete training online and signs an acknowledgement of understanding for the training, which is retained in their file. The Auditor verified this through training records and file reviews that volunteers and contractors at the facility had received training and reviewed the policies.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p>

## Random Inmate Interview Notes

### Inmate Records Review

## Random Staff Interview Notes

Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility (CCF) operating procedure directs that inmates are not permitted to engage in non-coercive sexual contact and may be disciplined for such behavior. Policy dictates that staff is prohibited from disciplining an inmate who makes a report of sexual abuse in good faith and based on a reasonable belief the incident occurred, even if the investigation does not establish sufficient evidence to substantiate the allegation. If it is determined that the inmate did commit sexual abuse in the correctional setting, they will be subject to disciplinary sanctions commensurate with the level of the infraction, and other disciplinary sanctions of others with the same or similar infractions. The Auditor reviewed inmate files, inmate records and interviewed random staff, including an interview with the PREA Compliance Manager. There is no evidence to suggest an inmate received a disciplinary charge for making an allegation of sexual abuse or sexual harassment in good faith.

Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility prohibits sexual activity between inmates. Inmates found to have participated in sexual activity are internally disciplined for such activity. If the sexual activity between inmates is found to be consensual, staff will not consider the sexual activity as an act of sexual abuse. Instances of sexual activity between inmates, if reported to be consensual, are still investigated and each case is taken at face value. This was verified through informal and formal interviews with staff.

Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility operating procedure states inmates are subject to formal disciplinary action following an administrative finding that they engaged in inmate-on-inmate sexual abuse. According to the submitted pre-audit questionnaire, there have been substantiated instances of inmate-on-inmate sexual abuse. Any substantiated reports of inmate-on-inmate abuse would result in a disciplinary charge for the perpetrator. There have been no criminal findings of guilt for inmate-on-inmate sexual abuse in this review period.

Agency policy requires that staff consider whether an inmate's mental health contributed to their behavior before determining their disciplinary sanctions. There are psychology staff available to provide mental health services to the inmates at Clarinda Correctional Facility. Any decision to offer counseling or therapy to offenders and the initiation of any such counseling or therapy for individuals who have committed sexual offenses would be done at the discretion of the mental health staff in conjunction with a treatment plan for the offender. Psychology staff stated that they would provide services to inmate perpetrators, if requested.

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

	<p>Interviews with staff and inmates confirmed their knowledge of the policy regarding inmates engaging in non-coerced sexual activity.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.81</b>	<b>Medical and mental health screenings; history of sexual abuse</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Site Review Observations</p> <p>Informal Conversations with Staff and Inmates</p> <p>Targeted Inmates Interview Notes</p> <p>Iowa Department of Corrections (IDOC) /Clarinda Correctional Facility (CCF) has policies in place that comply with the provisions of this standard. As previously stated under standard 115.41 the medical department does a second screening of the inmates and asks questions relative to sexual victimization as well as sexual abusiveness. If it is found that any inmate has experienced sexual assault in the community or a facility they will be offered and scheduled for an evaluation with a mental health practitioner within 14 days. I confirmed these evaluations with the medical and mental health personnel by reviewing mental health referral notes as well as during the random inmate interviews. The Auditor interviewed two inmates who reported prior sexual victimization during their risk screening. Both inmates told the Auditor that they were provided the opportunity to meet with someone from mental health. The inmate added that first meeting happened the first week they arrived at Clarinda Correctional Facility. The Auditor interviewed the staff who is responsible for performing the intake screenings. The Auditor was told that all offenders who report prior sexual abuse are offered a follow up with mental health. The referral is documented in the inmate file. This was further confirmed by reviewing progress note samples and random staff responsible for risk screenings.</p> <p>The Clarinda Correctional Facility ensures any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited</p>



	<p>to medical and mental health practitioners and other need to know staff, if required to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law, as evidenced by the site review checklist.</p> <p>Medical and mental health practitioners always obtain informed consent from inmates before reporting information about prior sexual victimization not related to the correctional or institutional setting, unless the inmate is under the age of 18. During the onsite phase of the audit, the Auditor interviewed two staff members from the medical department. Both told the Auditor that informed consent was a requirement before they could disclose information to other staff.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Informal Conversations with Staff and Inmates</p> <p>Inmate Record Reviews</p> <p>Specialty Staff Interview Notes</p> <p>Iowa Department of Corrections (IDOC) /Clarinda Correctional Facility (CCF) staff ensure that victims of sexual abuse receive prompt and appropriate medical intervention. The nature and scope are determined by medical and mental health practitioners according to their professional judgment. This was verified through progress note samples and interviews with medical and mental health staff and the PREA Compliance Manager.</p> <p>The IDOC provides 24-hour medical coverage; any inmate involved in a sexual abuse incident would immediately be brought to medical or transported to the local hospital for an evaluation. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders always take preliminary steps to protect the victim pursuant to § 115.62 and will immediately notify the appropriate medical and mental health practitioners, as evidenced by</p>

	<p>interviews with first responders. This was confirmed during random staff interviews.</p> <p>The IDOC PREA policy further state that prophylactic treatment and testing is offered to the inmate, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans. The Auditor reviewed mental health referral dates as part of the verification of evidence.</p> <p>During the onsite phase of the audit, the Auditor interviewed one staff member from the medical department; A nurse supervisor confirmed that any inmate who was the victim of sexual abuse would be immediately brought to the medical department as part of the coordinated response policy to an allegation of sexual abuse. The first step taken would be to evaluate the inmate for injuries and the urgent need for medical care. Special care would be taken to ensure that any evidence would be preserved. This evaluation is done immediately and is based on the medical professional's credentials. These policies and procedures were confirmed with the PREA Compliance Manager and mental health and medical staff during interviews. All medical and mental health services related to victim services are 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, as evidenced by facility policy.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Informal Conversations with Staff and Inmates</p> <p>Inmate Record Reviews</p> <p>Targeted Inmate Interview Notes</p> <p>Specialty Staff Interview Notes</p> <p>Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility (CCF) staff</p>

	<p>offer medical treatment and mental health evaluations to all inmates who have been victimized by sexual abuse, as evidenced by policy review staff interviews. The facility provides 24-hour medical coverage, any inmate involved in a sexual abuse incident would immediately be brought to medical for an evaluation or transported to the local hospital for an evaluation. The evaluation and treatment of such victims includes, 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, as evidenced by interviews with medical and mental health staff and random inmates.</p> <p>Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility medical and mental healthcare policy is written in accordance with the standard and specifically states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans. Regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident, the services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews and informal interviews with inmates. The auditor interviewed four targeted inmates and all reported being offered medical and mental health services following the incident. Multiple investigative case files were reviewed to confirm these evaluations were conducted.</p> <p>Iowa Department of Corrections (IDOC) and Clarinda Correctional Facility attempts to conduct a mental health evaluation of all known inmate-on-inmate abusers within 30 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners, facility staff provide these victims with medical and mental health services consistent with the community level of care as evidenced by policy, informal discussions and interviews with medical and mental health staff. Investigative cases were reviewed to confirm these evaluations were conducted.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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115.86	Sexual abuse incident reviews
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p>

## Specialty Staff Interview Notes

### Incident Case Reviews

The Clarinda Correctional Facility (CCF) has policy in place that outlines the facilities review of sexual abuse and sexual harassment incidents. The policy is written in accordance with all provisions of the standard. Clarinda Correctional Facility conducts a sexual abuse incident review at the conclusion of every substantiated sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded, as evidenced by policy, sexual abuse incident review samples and sexual abuse investigation reviews. According to the data entered in the pre-audit questionnaire 22 incident reviews were conducted within the last 12 months; these reviews ordinarily occur within 30 days of the conclusion of the investigation, as evidenced by the Warden and PREA Compliance Manager interview notes.

The review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. As evidenced by sexual abuse incident review samples and interviews with the Warden, PREA Compliance Manager and incident review team members, the review team always (1) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; (2) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; (3) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; (4) Assess the adequacy of staffing levels in that area during different shifts; (5) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and (6) Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to this section, and any recommendations for improvement and submit such report to the facility head and PREA compliance manager.

The Clarinda Correctional Facility utilizes a sexual abuse incident review form, which then becomes part of the investigative file which address all the questions of concern when reviewing an incident. If recommendations are made because of the incident review the facility implements the improvements or document its reasons for not doing so. I confirmed the incident review team process during staff interviews and by reviewing policy and documentation. Separately the PREA Compliance Manager and many department heads were informally interviewed and understood the process for reviewing incidents, documentation requirements and implementation processes that would follow.

After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.

115.87	Data collection
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>IDOC Website Review</p> <p>The Iowa Department of Corrections has established policies that address all provisions of this standard. The Agency will utilize a data collection instrument to collect all sexual abuse data from all its facilities. The tracking system contains information on all allegations of abuse, neglect and exploitation, and all serious incidents. One of the functions of the PREA Compliance Manager is to maintain this information. The Agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions, as evidenced by policy and the report sample. The Agency aggregates the incident-based sexual abuse data at least annually, as evidenced by the annual PREA report and website review.</p> <p>Incident-based data collected includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice, as evidenced by policy and website posted data. The facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews, as evidenced by policy and website posted data. A review of the Agency website reflects the comprehensive report is published and available to the public for all serious incidents to include sexual abuse and sexual harassment allegations. Compliance was further confirmed through review of completed data collection instruments and an interview with the PREA Coordinator.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>

115.88	Data review for corrective action
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Agency Website Review</p> <p>The Iowa Department of Corrections (IDOC) has policies in place that address all provisions of the standard. As evidenced by the survey of sexual violence reports, annual PREA reports, and interviews with the Agency Head Designee and the PREA Coordinator the Agency reviews all 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; Taking corrective action on an ongoing basis; and Preparing a semi-annual report of its findings and corrective actions for each facility, and the Agency.</p> <p>The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the Agency's progress in addressing sexual abuse. The PREA Coordinators' Office is responsible for the oversight of the reporting process. The Agency's report is approved by the Agency Head Designee and Executive Management Team and made readily available to the public through the Agency IDOC website. These tasks are initiated by the PREA Compliance Manager uploading incident information to a central data system. The Auditor verified this process of data collection through extensive interviews with the Agency Head Designee and the PREA Coordinator.</p> <p>The Agency would redact specific material when required from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted, as evidenced by semi-annual PREA reports on the website and the interview with the PREA Coordinator.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Evidence relied upon to make Compliance Determination:

	<p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Specialty Staff Interview Notes</p> <p>Agency Website Review</p> <p>Informal Conversations with Staff</p> <p>Site Review Observations</p> <p>The Agency has a policy in place that addresses the provisions of this standard. I found that the agency digitally securely retains all data collected, this data is available to the public through the website. The annual reports from 2014 through 2024 are published on the website. All personal identifiers have been removed from the reports. The agency has a policy in place that maintains all sexual abuse data for at least 10 years from the date received. Staff interviews and review of the annual reports further confirmed this procedure.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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115.401	Frequency and scope of audits
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Site Review Observations</p> <p>During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency ensured that each facility operated by the agency is audited at least once, as evidenced by a website review. During each one-year period starting on August 20, 2013, the agency ensured that at least one-third of each facility type operated by the agency is audited, as evidenced by a website review.</p> <p>The auditor had access to, and observed, all areas of the audited facility, as</p>

	<p>evidenced by the site review checklist. The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). The Auditor was permitted to conduct private interviews with inmates. Inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel, as evidenced by the Notice of Audit and observations made during the site review. The auditor received one written letter from an inmate related to this facility.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>
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<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Evidence relied upon to make Compliance Determination:</p> <p>IDOC Policy and Document Review</p> <p>Pre-Audit Questionnaire Responses</p> <p>IDOC PREA Policy</p> <p>Website Reviews</p> <p>The agency has published all final audit reports on their website, this was confirmed by navigating to the page on the website and reviewing all the audit reports.</p> <p>After a careful and detailed review of all the information, the Auditor determined the facility meets the requirements of this standard.</p>



**Appendix: Provision Findings****115.11 (a) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator**

Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
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Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
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**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
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Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
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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
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**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
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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
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**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
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**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
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	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.)	
<b>115.13 (a)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.13 (b)</b>	<b>Supervision and monitoring</b>	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
<b>115.13 (c)</b>	<b>Supervision and monitoring</b>	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
<b>115.13 (d)</b>	<b>Supervision and monitoring</b>	
	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

<b>115.14 (a)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (b)</b>	<b>Youthful inmates</b>	
	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
<b>115.14 (c)</b>	<b>Youthful inmates</b>	
	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
<b>115.15 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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.)	
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	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
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

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



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

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

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

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b) Policies to ensure referrals of allegations for investigations</b>		
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
<b>115.22 (c) Policies to ensure referrals of allegations for investigations</b>		
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
<b>115.31 (a) Employee training</b>		
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.31 (b)</b>	<b>Employee training</b>	
	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
<b>115.31 (c)</b>	<b>Employee training</b>	
	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
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	

	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
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.33 (a)</b>	<b>Inmate education</b>	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b)</b>	<b>Inmate education</b>	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c)</b>	<b>Inmate education</b>	
	Have all inmates received 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
<b>115.33 (d)</b>	<b>Inmate education</b>	
	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
<b>115.33 (e)</b>	<b>Inmate education</b>	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
<b>115.33 (f)</b>	<b>Inmate education</b>	
	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
<b>115.34 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.34 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

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



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

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

	Whether the inmate is detained solely for civil immigration purposes?	
<b>115.41 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.41 (h)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
<b>115.41 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

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

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

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
<b>115.43 (a)</b>	<b>Protective Custody</b>	
	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
<b>115.43 (b)</b>	<b>Protective Custody</b>	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
<b>115.43 (c)</b>	<b>Protective Custody</b>	

	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
<b>115.43 (d) Protective Custody</b>		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
<b>115.43 (e) Protective Custody</b>		
	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
<b>115.51 (a) Inmate reporting</b>		
	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
<b>115.51 (b) Inmate reporting</b>		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	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
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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	na



	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	na
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	na
	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.)	na
<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	

	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.)	na
	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.).	na
	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.)	na
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	na
	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.)	na
	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.)	na
	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.)	na
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	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.)	na
<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

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

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

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

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

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

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



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

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

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

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

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

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

	<b>victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. 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
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. 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
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

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



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

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

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

(f)	
	<div data-bbox="320 185 1273 555"> <p>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.)</p> </div> <div data-bbox="1302 185 1353 219">yes</div>