PREA Facility Audit Report: Final

Name of Facility: Wickford Barracks

Facility Type: Lockups

Date Interim Report Submitted: NA **Date Final Report Submitted:** 11/03/2023

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: D. Will Weir	Date of Signature: 11/03/ 2023

AUDITOR INFORMATION	
Auditor name:	Weir, Will
Email:	prea.america@gmail.com
Start Date of On- Site Audit:	09/19/2023
End Date of On-Site Audit:	09/19/2023

FACILITY INFORMATION		
Facility name:	Wickford Barracks	
Facility physical address:	7875 Post Road, North Kingstown, Rhode Island - 02852	
Facility mailing address:		

Primary Contact	
Name:	Lt. charles LeValley
Email Address:	charles.levalley@risp.gov
Telephone Number:	401 2943371

Sheriff/Chief/Director	
Name:	Colonel Darnell Weaver
Email Address:	darnell.weaver@risp.gov
Telephone Number:	4014441000

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

Facility Characteristics	
Designed facility capacity:	2
Current population of facility:	0
Average daily population for the past 12 months:	1
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	18 plus
Facility security levels/detainee custody levels:	N/A
Does the facility hold juveniles or youthful detainees?	Yes

Number of staff currently employed at the facility who may have contact with detainees:	240
Number of individual contractors who have contact with detainees, currently authorized to enter the facility:	0
Number of volunteers who have contact with detainees, currently authorized to enter the facility:	0

AGENCY INFORMATION		
Name of agency:	Rhode Island State Police	
Governing authority or parent agency (if applicable):		
Physical Address:	311 Danielson Pike, North Scituate, Rhode Island - 02857	
Mailing Address:		
Telephone number:		

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

Agency-Wide PREA Coordinator Information			
Name:	Timothy Allen	Email Address:	timothy.allen@risp.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of

Standards met, and the number and list of Standards not met.

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

Number of standards exceeded:

Number of standards met:

35

Number of standards not met:

0

POST-AUDIT REPORTING INFORM	ATION
GENERAL AUDIT INFORMATION	
On-site Audit Dates	
1. Start date of the onsite portion of the audit:	2023-09-19
2. End date of the onsite portion of the audit:	2023-09-19
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?	YesNo
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Blackstone Valley Advocacy Center
AUDITED FACILITY INFORMATION	
14. Designated facility capacity:	2
15. Average daily population for the past 12 months:	1
16. Number of inmate/resident/detainee housing units:	1
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	 Yes No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

43. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0

48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):

The Audit Team knew in advance that it would be difficult to interview detainees because the Barracks typically only have detainees for a few hours at a time and that is often during the night. The Team worked with the PREA Coordinator to travel to whatever Barracks had detainees, and made themselves available during the evenings as well. Another Agency Barracks (Lincoln Woods Barracks) did have 2 detainees and the PC took the Team to interview them. One was interviewed and one declined. Since all RISP Barracks are similar and are operated by the same administration, are accessed by the same Troopers, under the same policy and training, it is likely that detainee experiences are similar regardless of which of the 4 RISP Barracks in which they are detained. The Audit Team would have preferred to interview additional detainees and had numerous conversations with the PC to make sure no opportunities were missed during the days allotted for the On-Site Reviews.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	240
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0

52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	0
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	 □ Age □ Race □ Ethnicity (e.g., Hispanic, Non-Hispanic) □ Length of time in the facility □ Housing assignment □ Gender □ Other ■ None
If "None," explain:	Wickford Barracks had no detainees during the On-Site Review.
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Wickford Barracks had no detainees during the On-Site Review.
56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	Yes No

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57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Wickford Barracks had no detainees during the On-Site Review.	
Targeted Inmate/Resident/Detainee Interviews		
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0	
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".		
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0	
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees. The inmates/detainees in this targeted category declined to be interviewed.	
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ detainees).	Wickford Barracks had no detainees during the On-Site Review.	

60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in	Wickford Barracks had no detainees during the On-Site Review.
the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	
62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
	☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
	The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on	Wickford Barracks had no detainees during the On-Site Review.
information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	
66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
	☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.
	The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ■ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	Wickford Barracks had no detainees during the On-Site Review.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	Wickford Barracks had no detainees during the On-Site Review.
Staff, Volunteer, and Contractor Interv	/iews
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	3
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that	Length of tenure in the facilityShift assignment
apply)	Work assignment Rank (or equivalent) Other (e.g., gender, race, ethnicity, languages spoken) None
If "None," explain:	Work assignment Rank (or equivalent) Other (e.g., gender, race, ethnicity, languages spoken)

73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	Yes● No
a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)	■ Too many staff declined to participate in interviews. ■ Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles). ■ Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews. ■ Other
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor	Interviews
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	9
76. Were you able to interview the Agency Head?	● Yes ○ No

77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	YesNo
78. Were you able to interview the PREA Coordinator?	Yes
coordinator:	○ No
79. Were you able to interview the PREA Compliance Manager?	Yes
Compliance Manager:	○ No
	NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

	Other		
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	Yes No		
82. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	Yes No		
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.		
SITE REVIEW AND DOCUMENTATION SAMPLING			
Site Review			
PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.			
84. Did you have access to all areas of the facility?	YesNo		
Was the site review an active, inquiring proce	ess that included the following:		
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?	YesNo		

86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	Yes● No
a. Explain which critical functions you were unable to test per the site review component of the audit instrument and why:	Wickford Barracks had no detainees during the On-Site Review.
87. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	Yes No
88. Informal conversations with staff during the site review (encouraged, not required)?	Yes No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.
Documentation Sampling	
Where there is a collection of records to review-s records; background check records; supervisory processing records; inmate education records; m self-select for review a representative sample of	rounds logs; risk screening and intake edical files; and investigative files-auditors must
90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	YesNo
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	
Inmate- on- inmate sexual abuse	0	0	0	0
Staff- on- inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review				
98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0			
a. Explain why you were unable to review any sexual abuse investigation files:	There have been no allegations.			

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

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

110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	No NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF- ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	No NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	There have been no allegations.

SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	Yes No
Non-certified Support Staff	
116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	YesNo
a. Enter the TOTAL NUMBER OF NON- CERTIFIED SUPPORT who provided assistance at any point during this audit:	1
AUDITING ARRANGEMENTS AND COMPENSATION	
121. Who paid you to conduct this audit?	 The audited facility or its parent agency My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) A third-party auditing entity (e.g., accreditation body, consulting firm) Other
Identify the entity by name:	PREA America, LLC. I own the company.

Standards

Auditor Overall Determination Definitions

- Exceeds Standard (Substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard (requires corrective actions)

Auditor Discussion Instructions

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.111 Zero tolerance of sexual abuse and sexual harassment

Auditor Overall Determination: Meets Standard

Auditor Discussion

Rhode Island State Police (RISP) has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment, as well as a policy outlining how it will implement its approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment, and it includes sanctions for those found to have participated in those prohibited behaviors. According to interviews with staff, there is a commitment to the zero-tolerance policy and the safety of the detainees. RISP employs and designates an upper-level, agency-wide PREA Coordinator, who has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA Standards in the facility. The PREA Coordinator reports to the Director of the Department of Public Safety who answers to the Governor. The PREA Coordinator is a Captain who is also in charge of Professional Standards.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the PREA Coordinator, the Facility Commander, and Troopers who supervise detainees; Agency policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in its facilities (General Order 52 H II); Training

Curricula; Agency Organizational Chart; and Rhode Island State Police Rules and Regulations for Sworn Members March 2023.

Auditor Overall Determination: Meets Standard Auditor Discussion N/A. Neither the facility nor agency reports any contracts with other entities for the confinement of its detainees. Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Contract Administrator and the PREA Coordinator; detainee logs and rosters; and randomly selected agency detainee files documenting to where detainees were released.

115.113 Supervision and monitoring **Auditor Overall Determination: Meets Standard Auditor Discussion** Rhode Island State Police (RISP) develops, documents, and does its best to comply with a Staffing Plan that provides adequate staffing levels and, where applicable, video monitoring to protect detainees against abuse. In calculating adequate staffing levels, and in determining the need for video monitoring, RISP takes into consideration: all components of the facility's physical plant; the composition of the detainee population; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors. The average daily number of detainees varies greatly, but if there is a high number due to a "sweep," a Trooper will be assigned to the cell. Normally there is only one detainee in a cell. When there is a need to double-bunk, the detainees are asked, according to protocols and interviews, if they are comfortable with the double-bunking. At least once annually, RISP, in collaboration with the PREA Coordinator, reviews the Staffing Plan to see whether adjustments are needed to: the Staffing Plan; prevailing staffing patterns; the deployment of monitoring technology; or the allocation of agency or facility resources to commit to the Staffing Plan, to ensure compliance with it. Staffing Plans, policies, and reviews were provided to the Audit Team for review. Their video system records audio and visual data for at least 30 days. The vast majority of detainees are held less than 8 hours. In circumstances in which the site is not in compliance with its Staffing Plan, policy requires that these instances are documented and justified, but no such incident has occurred in the past 12 months.

The staffing of lockups is within the context of a much larger, reliable system of

staffing the RISP for all their duties and functions across the state.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head, Captains, Commander, Troopers, and the PREA Coordinator; Documentation of Staffing Plan development process; Staffing Plan; Documentation of Annual Reviews; General Order 52 H page 8 B 1 and 2. All evidence combines to demonstrate compliance with this Standard.

Auditor Overall Determination: Meets Standard Auditor Discussion This PREA Standard requires that youthful detainees be held separately from adult detainees. The agency accomplishes this task mainly by detaining very few juvenile detainees, keeping the juveniles in facilities with no adult detainees, and keeping them in custody for the shortest time possible. Analysis: Evidence used to determine compliance with this Standard includes interviews with the facility Commander, other administrators, and selected staff; and a review of detainee lists and Agency Policy found in General Order 52E. Additionally, since one juvenile was briefly held at the facility during the past year, the Audit Team was able to review documentation referencing that individual. RISP

complies with this Standard.

115.115

Auditor Overall Determination: Meets Standard Auditor Discussion No cross-gender searches of any kind are permitted by RISP, absent exigent circumstances, which must be documented. The facility does not conduct any kind of cross-gender searches of detainees, except in exigent circumstances, which are fully documented and justified, or when performed by medical practitioners. According to interviews and documentation provided, none of these have been conducted. Detainees can perform bodily functions without staff members of the opposite gender viewing their breasts, buttocks, or genitalia, other than in exigent circumstances or when such viewing is incidental to routine cell checks. Staff of the opposite gender announce their presence when entering a detainee housing unit. Staff are forbidden from searching or physically examining a transgender or intersex detainee for the sole purpose of determining the detainee's genital status. If the detainee's genital status is unknown, such may be determined amid conversations with the detainee, through review of medical records, or, if necessary, by obtaining

Limits to cross-gender viewing and searches

that information as part of a broader medical examination conducted in private by a medical practitioner. RISP has trained security staff in conducting cross-gender patdown searches in exigent circumstances, and in conducting searches of transgender and intersex detainees in a professional and respectful manner and in the least intrusive manner possible, consistent with security needs.

Analysis: Evidence used to determine compliance with this Standard includes: interviews with randomly selected staff and one agency detainee; Policies and procedures governing: pat-down searches of detainees, strip searches, and visual body cavity searches, and cross-gender viewing (Logs of exigent circumstances were not applicable since no such searches were completed); policy prohibiting staff from searching or physically examining a transgender or intersex detainee for the sole purpose of determining the detainee's genital status; training curricula regarding cross-gender pat-down searches and searches of transgender and intersex detainees; and staff training logs. The policies are found in General Order 52 A (A-3, 5, 6, & 7). The Audit Team finds sufficient evidence of RISP's compliance with this Standard.

115.116

Detainees with disabilities and detainees who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

The PREA Coordinator assures that whenever the Barracks have a detainee with a disability, its administrators make the appropriate accommodations for the detainee to comprehend PREA. The facility provides a list of interpreter services, with instructions and protocols for utilizing the services, including for emergencies. A poster in the booking area is used to help determine what language a detainee speaks. Also provided are the RISP policies, applying to all facilities, for providing close supervision, when needed, by detainees who have developmental disabilities and/or serious mental health needs. iPads are provided with close captioning for the hearing impaired. The Audit Team witnessed a person with limited vision being processed through Intake, and the interview indicated the detainee's understanding of PREA and the steps taken to ensure that the detainee's disability was addressed. These policies address the identification of needs and provide appropriate services, during Intake and throughout the time the detainee is in care. Also specifically addressed is the provision of services for victims of sexual assault. RISP has established procedures to provide detainees with disabilities and detainees with limited English proficiency 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. Agency policy prohibits the use of detainee interpreters, detainee readers, or other types of detainee assistants, other than in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of First-Response duties under ß 115.364, or the investigation of the resident's allegations. In the past 12 months, there have been no instances where detainee interpreters, readers, or other types of detainee assistants have been used, and it was not the case that an extended delay in obtaining another interpreter could compromise the detainee's safety, the performance of first-response duties under £115.364, or the investigation of the detainee's allegations.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head and all available Troopers. Policy prohibiting the use of detainee interpreters, detainee readers, or other types of detainee assistants, except in limited circumstances. Contracts with interpreters or other professionals hired to ensure effective communication with detainees. Written materials used for effective communication about PREA with detainees with disabilities, limited reading skills, or limited English proficiency. Documentation of staff training on PREA-compliant practices for detainees with disabilities. Policies and procedures regarding the equal opportunity of detainees with disabilities and of detainees with limited English proficiency to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Policies are found in General Order 55D-III. Procedures are located in GO at IV A-E. A triangulation of the evidence supports full compliance with this Standard.

115.117 Hiring and promotion decisions

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP policy prohibits hiring or promoting anyone who may have contact with detainees, and it prohibits enlisting the services of any contractor who may have contact with detainees, who: has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution covered by PREA; 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 described in this section. RISP policy requires the consideration of any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor who may have contact with detainees. Policy requires that, before it hires any new employees who may have contact with detainees, RISP conducts criminal background record checks; and, consistent with Federal, State, and local law, makes 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. During the past 12 months, all staff and contract persons who have been hired, who may have contact with detainees, have had criminal background record checks. Policy requires that all Troopers must reenlist every three years, requiring all reviews and background checks to be

conducted as if they were a new hire. The Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Unless prohibited by law, the agency shall 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.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with Human Resources staff. Policies on promotions and hiring of employees and contractors, including policies governing criminal background checks, of current employees and contractors who may have contact with detainees. Files of persons hired or promoted in the last 12 months to determine whether proper criminal record background checks have been conducted and whether questions regarding past conduct were asked and answered. Documentation of background records checks of current employees at three-year intervals, when applicable. There are no contractors or volunteers. Relevant Agency Policy for this Standard is found in General Order 52H IV C. The Audit Team finds RISP fully compliant with this Standard.

115.118 Upgrades to facilities and technologies

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP has not acquired a new facility, nor substantially updated Wickford Barracks. The facility has installed a video monitoring system. The documentation provided, as well as interviews with administrators, indicates that PREA will be considered as any updates are planned in the future.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head and the facility Commander; Agency Policies relevant to this Standard, found in General Order 52H-C-4; and demonstration of the video monitoring system during the Site Review. RISP clearly upholds this Standard.

115.121 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP completes administrative and criminal investigations. Criminal investigations are completed either through their Major Crimes or Professional Standards Units, depending on the type of allegation. There were no investigations or forensic interviews performed or indicated in the past 12 months regarding this barracks.

The Rape Crisis Center is available to provide victim advocate services. The facility does not have a qualified agency staff member to fulfill these duties. The Auditor verified that the Rape Crisis Center is available 24/7, 365 days per year, providing advocacy whenever it is needed. RISP has MOU's with the Rape Crisis Center and other organizations that provide similar services regionally. Rhode Island State Police Training Academy teaches how to conduct criminal investigations. Academy classes include Sexual Assault Investigation, Crime Scene Processing, Evidence Preservation, Interviewing, Interrogation, and Internal Affairs. Topics covered in these classes include legal issues; cultural competency; trauma; victim response; medical and mental health care issues of sexual assault victims; First Responder responsibilities; evidence collection, processing, and preservation; interviews with victims and suspects; ensuring proper documentation; working with the Attorney General Office and Victim Advocates; Miranda rights; and application of Garrity rights. When conducting a sexual abuse investigation, the investigators follow a uniform evidence protocol that is developmentally appropriate. Forensic examinations are offered without financial cost to the victim. They are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) at local hospitals or, most often, Rhode Island Hospital in Providence. Due to the size of the State, all barracks are within a 45-minute drive to the main Hospital. When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. The facility documents efforts to provide SANEs or SAFEs. These procedures are well-stated in RISP's Coordinated Response plans, and they are understood by the administrators and managers, who will assure proper care is provided to alleged victims.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with Troopers, the Commander, forensic experts, investigators, a SANE Nurse, and the PREA Coordinator. Uniform evidence protocol governing how to obtain usable physical evidence in allegations of sexual abuse. General Order 52H VIII C and D. The triangulation of the evidence supports a conclusion of compliance with this Standard.

115.122 Policies to ensure referrals of allegations for investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP and each barracks ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. In the past 12 months, there have been no allegations of sexual abuse or sexual harassment received regarding detainees. The agency documents all referrals of allegations of sexual abuse or sexual harassment for criminal investigation. Investigative responsibilities are published on the agency website.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head designee, the PREA Coordinator, and investigative

staff; agency website; and policies and procedures governing investigations of allegations of sexual abuse and sexual harassment found in GO 77A and 77B as well as GO 52H-IV. Compliance with this Standard has been verified by the Audit Team.

115.131 Employee and volunteer training

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP trains all employees who may have contact with detainees on the all of these required matters, as confirmed in multiple staff interviews: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill responsibilities under RISP's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, reporting, and response; detainees' right to be free from sexual abuse and sexual harassment; the right of both detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement facilities; the common reactions of victims of sexual abuse and sexual harassment; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with detainees; how to communicate effectively and professionally with all detainees; and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Between trainings, RISP provides employees with annual refresher information about current policies regarding sexual abuse and sexual harassment. Power DMS is used to distribute new policies, procedures, and trainings and ensures each trooper has read and understands the information.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with troopers; training policy and procedures; staff training curricula; and samples of records documenting staff training regarding compliance with this Standard. Policies and procedures for training are found in GO 52H -V. Volunteers and contractors do not have contact with detainees. RISP exercises full compliance with this Standard.

Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy

Auditor Overall Determination: Meets Standard

Auditor Discussion

Wickford Barracks' detainees receive information, at the time of Intake, about the zero-tolerance policy and about how to report incidents or suspicions of sexual

abuse or sexual harassment. Key information, the facility ensures, is continuously and readily available or visible to detainees through posters and written electronic formats. According to interviews and information provided, all detainees admitted during the past 12 months have received this information. The agency maintains documentation of detainees' participation in PREA education sessions. Currently, there are no contractors who have contact with detainees. Detainees do not work in the facility.

Analysis: Evidence used to determine compliance with this Standard includes: An interview with an agency detainee, the Commander, Barracks' Intake staff, and Troopers; random file selection of detainees; and observation of postings in the cell and intake areas. When triangulated, the evidence indicates compliance with this Standard.

115.134 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP does conduct its own administrative investigations, but it does so after first performing criminal investigations if they are indicated. The Rhode Island State Police are officially certified with their own independent crime lab. In addition to the extensive investigator and sexual abuse investigator training, special training for sexual abuse investigations in confinement settings is taken through the National Institute of Corrections. All RISP Troopers are trained regarding their responsibilities and may be retrained when questions arise regarding their understanding of their duties or regarding their performance. RISP requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Specialized training includes techniques for interviewing juvenile sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Analysis: Evidence used to determine compliance with this Standard includes interviews with Investigative staff and a forensic expert; Agency training policy for Investigative staff; Investigator training curriculum; and documentation that Agency Investigators have completed the required training. The relevant policy is found in GO 52H at V C-8. All the evidence accumulated shows compliance with this Standard.

115.141 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP has a policy that requires that, upon admission to the facility or transfer from another facility, all detainees must receive screening for risk of sexual abuse victimization or sexual abusiveness toward other detainees upon Intake, even when not held overnight. They attempt to ascertain information about: Whether the detainee has a mental, physical, or developmental disability; The age of the detainee; The physical build and appearance of the detainee; Whether the detainee has previously been incarcerated; the detainee's own perception of vulnerability; and Any other specific information about individual detainees that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other detainees. This information is ascertained through conversations with the detainee during the Intake process. This Standard requires that "before placing any detainees together in a holding cell, staff shall consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused and, when appropriate, shall take necessary steps to mitigate any such danger to the detainee." In addition, for detainees who will spend the night, "all detainees shall be screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees." All RISP detainees are screened, not just those spending the night.

Analysis: Evidence used to determine compliance with this Standard includes interviews with Risk Screening staff, an agency detainee, and the PREA Coordinator. Also, policy and procedures were reviewed governing screening of detainees upon admission to a facility or transfer to another facility. The screening instrument used to determine the risk of victimization or abusiveness was reviewed. Records for detainees admitted to the facility within the past 12 months were reviewed. The relevant policy is found under General Order 52H at VI A. This combination of evidence suffices to establish compliance with this Standard.

115.151 Detainee reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP has established procedures allowing for multiple internal ways for detainees to report privately to agency officials about sexual abuse or sexual harassment, and about retaliation by other detainees or staff for reporting sexual abuse and sexual harassment. RISP provides at least one way for detainees to report abuse or harassment to an entity that is not part of the facility. RISP has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports immediately. RISP does provide detainees with access to tools for making written reports of sexual abuse or sexual harassment, and for reporting retaliation by other detainees or staff for reporting sexual abuse and sexual harassment. The

option for external, potentially anonymous reporting is the Rhode Island Victims of Crime 24-Hour Helpline operated by the RI Coalition Against Domestic Violence AKA Blackstone Valley Advocacy Center (800-494-8100). The Agency has also established procedures for staff to privately report sexual abuse and sexual harassment of detainees.

Analysis: Evidence used to determine compliance with this Standard includes interviews with Troopers, an agency detainee, the PREA Coordinator, and the Commander. Reviews were conducted of all of the following policies and agreements: detainee reporting policy; documentation on detainee reporting; documentation of an agreement with an outside entity responsible for taking reports; detainee reporting policy relevant to reporting to an outside entity; policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties; staff training regarding resident reporting; MOU with Blackstone Valley Advocacy Center; and policy and documentation outlining procedures for staff to privately report sexual abuse and sexual harassment of detainees. Relevant Agency Policy is found in GO 52H at VII. The MOU requires Blackstone Advocacy Center to immediately forward detainee reports of sexual abuse and sexual harassment to agency officials, allowing the detainee to remain anonymous upon request. The Agency has demonstrated full compliance with this Standard.

115.154 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP provides methods to receive third-party reports of resident sexual abuse or sexual harassment. Policy clearly states any staff member is required to take complaints and that complaints can be anonymous. Anyone can call the reporting line. The RISP agency website explains ways to report, and it provides methods whereby to report.

Analysis: Evidence used to determine compliance with this Standard includes: Publicly distributed information on how to report sexual abuse or sexual harassment on behalf of detainees, in the form of postings at the facility as well as online; interviews with Troopers, administrators, and a detainee; and testing of the reporting system. The Audit Team finds Wickford Barracks to be compliant with this Standard.

115.161 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

All staff are required to report, immediately and according to agency policy: any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred; any retaliation against detainees or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. RISP requires all staff to comply with any applicable mandatory child abuse reporting laws, as well as reports, as (and when) appropriate, to licensing agencies and Adult Protective Services. Other than when reporting to designated supervisors or officials and designated State or local service agencies, RISP policy prohibits staff from revealing any information related to a sexual abuse report to anyone beyond what is necessary to make treatment, investigation, and other security and management decisions. Upon receiving any allegation of sexual abuse, the Barracks promptly reports the allegation to the appropriate agency office and to agency investigators.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head, the PREA Coordinator, the Commander in charge of the facility, and with Troopers. Relevant policy found in GO 52H VI B. The Audit Team tested the reporting system. The Audit Team found RISP in full compliance with this Standard.

Auditor Overall Determination: Meets Standard Auditor Discussion When RISP or the barracks learns that a detainee is subject to a substantial risk of imminent sexual abuse, it takes action to protect the detainee immediately. There have been no instances in the past 12 months when the facility determined that a detainee was subject to a substantial risk of imminent sexual abuse. Analysis: Evidence used to determine compliance with this Standard includes: Interviews with the Agency Head, the PREA Coordinator, the Commander, and, with staff (Troopers); and relevant policy governing the agency's protection duties when detainees are subject to a substantial risk of imminent sexual abuse, found in GO

115.163	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

52H VI B. RISP has been found compliant with this Standard.

Wickford Barracks has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the Commander, within 72 hours and as soon as possible, must notify the head of the facility, or the appropriate office of the agency or facility, where sexual abuse is alleged to have occurred. Protective Services and law enforcement will also be contacted, as appropriate. RISP is required to document that it has provided such notification within 72 hours of receiving the allegation. The agency/facility policy requires that allegations received from other facilities/agencies have been investigated in accordance with the PREA Standards. In the past 12 months, there have been no other facilities about or from which Wickford Barracks has received allegations of sexual abuse.

Analysis: Evidence used to determine compliance with this Standard include the following: Policy requiring reporting to other facilities within 72 hours found in General Order 52H VII C; form used to document allegations; and interviews with the Agency Head, the PREA Coordinator and the facility Commander. Wickford Barracks complies with this Standard.

115.164 Staff first responder duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

RISP has a First Responder policy for allegations of sexual abuse. Its policy requires that, upon learning of an allegation that a detainee was sexually abused, the Trooper responding to the report shall be required to: (1) separate the alleged victim and abuser; and (2) preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that still allows for the collection of physical evidence, those appropriate steps will be as follows: (1) The First Responder requests 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 (2) the First Responder should 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. First Responders must also make sure their superiors are aware of the incident and that notifications are made according to Standard 115.361 above. In the past 12 months, there were no allegations; so, First Responder protocols were not utilized regarding any instance of sexual abuse.

Analysis: Evidence used to determine compliance with this Standard includes: Interviews were conducted with Troopers (First Responders), administrators, investigators, and supervisors. Agency policy governing staff First Responder duties is found in GO 52H VIII, GO 77 B and Go 53B. Also reviewed were training materials and the Coordinated Response Plan. This triangulation of evidence shows full compliance with this Standard.

115.165	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	RISP has developed a written institutional plan to coordinate actions taken, among staff First Responders, any medical or mental health practitioners, Investigators, and facility leadership, in response to an incident of sexual abuse. Any receiving facility shall be notified of any known medical and social services needs of an alleged victim that is transferred unless the victim requests otherwise.
	Analysis: Evidence used to determine compliance with this Standard includes the Coordinated Response Plan, which was provided to the Audit Team. It was discussed during interviews with the Commander, the PREA Coordinator, the Agency Head, and others. Also considered was the training associated with the plan, and evidence that the plan was understood, implemented, distributed, posted, and regularly reviewed. All the provided evidence cumulatively demonstrates compliance with this Standard.

115.166	Preservation of ability to protect detainees from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency, facility, or other governmental entity responsible for collective bargaining on the agency's behalf has neither entered nor renewed any collective bargaining agreement that restricts their ability to protect detainees from abusers.
	Analysis: Evidence used to determine compliance with this Standard includes a review of the Collective Bargaining Agreement, General Order 52H X A, and interviews with the Agency Head, the PREA Coordinator, and Human Resources.

115.167	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	RISP's policy intends to protect all detainees and staff who report sexual abuse or sexual harassment, or who cooperate with sexual abuse or sexual harassment investigations, from retaliation by other detainees or staff. It designates specific staff with ensuring proper retaliation monitoring. RISP monitors the conduct or

treatment of detainees or staff who reported sexual abuse and that of detainees who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by detainees or staff. Status checks for detainees are included in this policy. If any retaliation is noted or suspected, RISP acts promptly to remedy any such retaliation. There have been no reports of retaliation in the past 12 months. RISP's monitoring includes any resident disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff.

Analysis: Evidence used to determine compliance with this Standard includes the following: Interviews with the Agency Head, the PREA Coordinator, the Commander, and designated staff in charge of Retaliation Monitoring; and Policy prohibiting retaliation in GO 52H VII-I. Based on the evidence provided, the Audit Team finds RISP compliant with this Standard.

115.171 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The agency conducts criminal investigations (when the alleged behavior is criminal) and then administrative investigations. RISP has policy and procedure related to agency investigations which require investigations to be completed promptly, thoroughly, and objectively for all allegations. All investigators conducting sexual abuse investigations receive special training in sexual abuse investigations. Also, investigators are required to gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. They must interview suspected victims and perpetrators as well as witnesses. They must also review prior complaints and reports of sexual abuse involving the suspected perpetrator. The agency does not terminate an investigation solely because the source of the allegation recants it. Substantiated allegations of conduct that appear to be criminal are referred for prosecution through the Attorney General's Special Victims Unit. The agency retains all written reports pertaining to the administrative and/or criminal investigations of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. The credibility of an alleged victim, suspect, or witness will be assessed on an individual basis; it will not be determined by the person's status as a detainee or staff. No polygraphs are required. Investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Such investigations will be documented in written reports, which shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The departure of the alleged abuser or victim from the employment or control of RISP will not provide a basis for terminating an investigation.

Analysis: Evidence used to determine compliance with this Standard includes:

Interviews with investigative staff, with the Commander, and with the PREA Coordinator; agency policies related to criminal and administrative agency investigations; training curricula; and training records for Investigators. Investigative Policies are in GO 52H -IV. The Audit Team finds that RISP upholds this Standard.

115.172	Evidentiary standard for administrative investigations		
	Auditor Overall Determination: Meets Standard		
	Auditor Discussion		
	Written policy and interviews with administrators verify that RISP imposes a standard of preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated.		
	Analysis: Evidence used to determine compliance with this Standard includes the interviews with investigative staff and the PREA coordinator, and policy imposing a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated in GO 52H IV B. RISP acts in accord with this Standard.		

115.176 **Disciplinary sanctions for staff Auditor Overall Determination: Meets Standard Auditor Discussion** RISP Troopers are subject to disciplinary sanctions, up to and including termination, for violating agency sexual abuse or sexual harassment policies. This is enunciated during new employee training. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. 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, are reported to agency investigators, any other applicable law enforcement, and any relevant licensing bodies. Analysis: Evidence used to determine compliance with this Standard includes: Staff

disciplinary policy regarding violations of agency sexual abuse or sexual harassment policies in GO 52HIV C. Review of hiring and training materials, and interview with human resources staff. Interviews with the PREA Coordinator, the Commander, and the trainer. This triangulation of evidence shows compliance with this Standard.

Auditor Overall Determination: Meets Standard Auditor Discussion RISP stipulates in its policy that any contractor who engages in sexual abuse shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. There are not contractors or volunteers; so, none have been reported to law enforcement agencies or relevant licensing bodies for engaging in sexual abuse of detainees. Analysis: Evidence used to determine compliance with this Standard includes an interview with the facility lieutenant indicating there are no contractors or volunteers who have contact with detainees. This is consistent with PAQ information provided by the PREA Coordinator.

115.178	Referral for prosecution for detainee-on-detainee sexual abuse			
	Auditor Overall Determination: Meets Standard			
	Auditor Discussion			
	When there is probable cause to believe a detainee sexually abused another detainee, the agency refers the matter to investigators and prosecutors. Also, a detainee may be sent to another facility.			
	Analysis: Evidence used to determine compliance with this Standard includes interviews with the Commander, the PREA Coordinator, Investigators, and Troopers. Also reviewed were PREA policies and training. The Audit Team finds RISP compliant with this Standard.			

115.182	Access to emergency medical and mental health services		
	Auditor Overall Determination: Meets Standard		
	Auditor Discussion		
	According to RISP policy and interviews conducted, detainee victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, which will probably be in Providence. Treatment services will be provided to the victim, without financial cost, and regardless of whether the victim names the abuser or cooperates with the investigation.		
	Analysis: Evidence used to determine compliance with this Standard includes interviews with staff and a review of policies and procedures regarding access to		

treatment services by detainee victims of sexual abuse, found in GO 52H page 1. Also reviewed, and compared with other sources of information, were First Responder Duties and the Coordinated Response Plans. RISP is in full compliance with the terms of this Standard.

115.186 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

According to policy, RISP conducts a sexual abuse Incident Review at the conclusion of every sexual abuse criminal or administrative investigation, unless the allegation has been determined to be unfounded. Because, in the past 12 months, there have been no criminal and/or administrative investigations of alleged sexual abuse completed at the facility, no Incident Reviews were required. In the event of an investigation, the Commander and the PREA Coordinator verify that Wickford Barracks will conduct a sexual abuse Incident Review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation. The sexual abuse Incident Review Team will include upper-level management officials, and it will allow for input from line supervisors and Investigators. The review team's responsibilities include the following: They consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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; examine the area in the facility where the incident allegedly occurred, to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area, during different shifts; assess whether monitoring technology should be deployed or augmented, to supplement supervision by staff; prepare a report of their 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 the PREA Coordinator. The Agency Head designee, as well as the facility Commander, assured the Audit Team that these processes are taken very seriously by RISP and that the Barracks will certainly implement the recommendations for improvement or document its reasons for not doing so.

Analysis: Evidence used to determine compliance with this Standard includes interviews with the Commander, with the PREA Coordinator, and with the Incident Review Team; and policies and procedures on conducting sexual abuse Incident Reviews found in GO 52H-IV A. Also, procedures were reviewed regarding other types of reviews that have occurred within the agency, consistent with the way sexual abuse incident reviews would be held. All in all, Wickford Barracks has demonstrated full compliance with this Standard.

115.187	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The RISP PREA Coordinator verified that each Barracks collects accurate, uniform data for every allegation of sexual abuse, using a standardized instrument and set of definitions. The Barracks provides this to RISP for annual reporting. The facility maintains, reviews, and collects data, as needed, from all available incident-based documents, including reports, investigation files, and sexual abuse Incident Reviews.
	Analysis: Evidence used to determine compliance with this Standard includes: Interviews with administrators, the policy regarding sexual abuse data collection (GO 52H IV -B), the set of definitions used for collecting data on sexual abuse allegations at facilities, and the data collection instrument used for collecting data on sexual abuse allegations at facilities. Wickford Barracks complies fully with this Standard.

115.188 Data review for corrective action Auditor Overall Determination: Meets Standard **Auditor Discussion** Data collected and aggregated pursuant to £115.387 is reviewed in order to improve the effectiveness of sexual abuse prevention, detection, and response by identifying problem areas, taking corrective actions, and preparing an Annual Report. The Annual Report includes a comparison of the current year's data and corrective actions with those from prior years, and it provides an assessment of RISP's progress at each facility, as well as within the whole agency. RISP makes its Annual Report readily available to the public. The Agency Head approves the Annual Reports after any needed redactions are made. These redactions are limited to specific materials, where publication would present a clear and specific threat to the safety and security of the facility. The Auditor reviewed the RISP Annual Report available at https://risp.ri.gov/forms/index.php. Analysis: Evidence used to determine compliance with this Standard includes interviews with the Agency Head and the PREA Coordinator; documentation of corrective action plans; Annual Reports of findings from data reviews and any corrective actions; and the link to the website where the Annual Report is available. Policy for corrective action in the Annual Report is found in GO 52H IV-C. The Audit Team has found that RISP has demonstrated full compliance with this Standard.

115.189	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency ensures that data collected pursuant to § 115.187 are securely retained. The agency makes all aggregated sexual abuse data from lockups under its direct control readily available to the public annually through its website. The agency maintains sexual abuse data collected pursuant to § 115.187 for at least 10 years after the initial collection date.
	Analysis: Evidence used to determine compliance with this Standard includes interviews with the PREA Coordinator, and policy is found in GO 52H IV. Data is available at https://risp.ri.gov/forms/index.php. This triangulation of evidence supports a finding of compliance with this Standard.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The agency ensures that each lockup is audited at least once every 3 years. The Audit Team finds RISP compliant with this Standard.

115.403	Audit contents and findings			
	Auditor Overall Determination: Meets Standard			
	Auditor Discussion			
	The agency ensures that the Auditor's Final Report is published on the agency's website. The Audit Team verified that RISP complies with this Standard.			

Appendix: Provision Findings			
115.111 (a)	Zero tolerance of sexual abuse and sexual harassment		
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes	
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes	
115.111 (b)	Zero tolerance of sexual abuse and sexual harassment		
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes	
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes	
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?	yes	
115.112 (a)	.2 Contracting with other entities for the confinement of detainees		
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na	
115.112 (b)	Contracting with other entities for the confinement of detainees		
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na	
115.113 (a)	Supervision and monitoring		

	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.113 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.113 (c)	Supervision and monitoring	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and	yes
	documented whether adjustments are needed to: The lockup's	,

	deployment of video monitoring systems and other monitoring technologies?	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes
115.113 (d)	Supervision and monitoring	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	yes
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes
115.114 (a)	Juveniles and youthful detainees	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	yes
115.115 (a)	Limits to cross-gender viewing and searches	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.115 (b)	Limits to cross-gender viewing and searches	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
115.115 (c)	Limits to cross-gender viewing and searches	
	Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent	yes

	Detainees who are deaf or hard of hearing? Does the agency take appropriate steps to ensure that detainees 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: Detainees who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that detainees 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:	yes
115.116 (a)	Detainees with disabilities and detainees who are limental English proficient	nited
	Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the agency train law enforcement 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
115.115 (e)	Limits to cross-gender viewing and searches	
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, 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
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
115.115 (d)	Limits to cross-gender viewing and searches	
	Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes
	circumstances or when such viewing is incidental to routine cell checks?	

115.116	Detainees with disabilities and detainees who are lim	nited
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees who: are blind or have low vision?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities including detainees 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 detainees with disabilities including detainees who: Have intellectual disabilities?	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
	Do such steps include, when necessary, ensuring effective communication with detainees who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that detainees 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 the overall determination notes.)	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that detainees 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: Detainees who have intellectual disabilities?	yes

(b)	English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to detainees who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.116 (c)	Detainees with disabilities and detainees who are limentary in the English proficient	nited
	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes
115.117 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees 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 detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o 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 detainees who: Has been	yes

115.117 (f)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees?	yes
115.117 (e)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees?	yes
115.117 (d)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with detainees, 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
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
115.117 (c)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees?	yes
115.117 (b)	Hiring and promotion decisions	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	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?	

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

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	agency's ability to protect detainees 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.)	
115.121 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.121 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.121 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes

	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.121 (d)	Evidence protocol and forensic medical examinations	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes
115.121 (e)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
115.122 (a)	Policies to ensure referrals of allegations for investig	ations
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.122 (b)	Policies to ensure referrals of allegations for investig	ations
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na

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	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
115.131 (a)	Employee and volunteer training	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	yes

	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.131 (b)	Employee and volunteer training	
	Have all current employees and volunteers who may have contact with detainees received such training?	yes
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
115.131 (c)	Employee and volunteer training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.132 (a)	Detainee, contractor, and inmate worker notification agency's zero-tolerance policy	of the
	During the intake process, do employees notify all detainees of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	Sexual marassment	
115.132 (b)	Detainee, contractor, and inmate worker notification agency's zero-tolerance policy	of the
	Detainee, contractor, and inmate worker notification	of the yes
	Detainee, contractor, and inmate worker notification agency's zero-tolerance policy Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency's zero-tolerance policy regarding sexual abuse and	

	conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	
115.134 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(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 115.121(a).)	yes
115.134 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	na
115.141 (a)	Screening for risk of victimization and abusiveness	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	na
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	na
115.141	Screening for risk of victimization and abusiveness	

(b)		
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	na
115.141 (c)	Screening for risk of victimization and abusiveness	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	na
115.141 (d)	Screening for risk of victimization and abusiveness	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	na
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee's alleged offense	na

and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	
Detainee reporting	
Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
Detainee reporting	
Does the agency also provide at least one way for idetainees 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 entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	yes
Does that private entity or office allow the detainee to remain anonymous upon request?	yes
Detainee reporting	
Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes
Detainee reporting	
Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	yes
Third-party reporting	
	Detainee reporting Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment? Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment? Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? Detainee reporting Does the agency also provide at least one way for idetainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Is that entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials? Does that private entity or office allow the detainee to remain anonymous upon request? Detainee reporting Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Do staff members promptly document any verbal reports of sexual abuse and sexual harassment made verbally abuse and sexual harassment? Detainee reporting Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?

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	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes
115.161 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.161 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, do 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, and investigation decisions?	yes
115.161 (c)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.161		
(d)	Staff and agency reporting duties	
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated investigators?	yes
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency's designated	yes

(a)		
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes
115.163 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.163 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.163 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.163 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.164 (a)	Staff first responder duties	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement 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 a detainee was sexually abused, is the first law enforcement 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,	yes

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	defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.164 (b)	Staff first responder duties	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	yes
115.165 (a)	Coordinated response	
	Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse?	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim's potential need for medical or social services?	yes
115.165 (b)	Coordinated response	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the	yes

	receiving facility of the victim¹s potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	
115.166 (a)	Preservation of ability to protect detainees from contabusers	act with
	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 limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.167 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.167 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.167 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes
115.167 (d)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.171 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	yes
115.171 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134?	yes
115.171 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
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115.171 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.171 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.171 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.171 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.171 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.171 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.171(f)	yes

	and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	
115.171 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the lockup or agency does not provide a basis for terminating an investigation?	yes
115.171 (I)	Criminal and administrative agency investigations	
	When outside agencies investigate sexual abuse, does the agency 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 115.121(a).)	na
115.172 (a)	Evidentiary standard for administrative investigation	ıs
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.176 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.176 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.176 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.176 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: o Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.177 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.177 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with detainees?	yes
115.178 (a)	Referral for prosecution for detainee-on-detainee sex	cual abuse
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes
115.178 (b)	Referral for prosecution for detainee-on-detainee sex	cual abuse
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See	na

	115.121(a).)	
115.182 (a)	Access to emergency medical and mental health services	
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes
115.182 (b)	Access to emergency medical and mental health serv	ices
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.186 (a)	Sexual abuse incident reviews	
	Does the lockup conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.186 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.186 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes
115.186 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the lockup?	yes
	Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in	yes

	the area may enable abuse?	
	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 §§ 115.186(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	yes
115.186 (e)	Sexual abuse incident reviews	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.187 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes
115.187 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.187 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes
115.187 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.187 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its detainees? (N/A if the agency does not contract for the confinement of its detainees.)	na
115.187 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.188 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.187 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 § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.187 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 lockup, as well as the agency as a whole?	yes
115.188 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.188 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it	yes

	does not have one, through other means?	
115.188 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup?	yes
115.189 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	yes
115.189 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.189 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.189 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	

	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of	yes

single facility agencies, there has never been a Final Audit Report issued.)
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