PREA Facility Audit Report: Final

Name of Facility: Garden State Youth Correctional Facility

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 08/21/2021

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.		V
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.		V
Auditor Full Name as Signed: Robert Manville Date of Signature: 08/21/2021		

AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	07/20/2021
End Date of On-Site Audit:	07/22/2021

FACILITY INFORMATION	
Facility name:	Garden State Youth Correctional Facility
Facility physical address:	55 Hogback Road, Crosswicks, New Jersey - 08515
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Lisa Schofield
Email Address:	Lisa.Schofield@doc.nj.gov
Telephone Number:	609-298-6300 x2009

Warden/Jail Administrator/Sheriff/Director	
Name:	Robert Buechele
Email Address:	Rober.Buechele@doc.nj.gov
Telephone Number:	609-298-2300 x2200

Facility PREA Compliance Manager		
Name:	Kenya Collins	
Email Address:	kenya.collins@doc.nj.gov	
Telephone Number:	O: (609) 298-6300 x2013	
Name:	Lisa Schofield	
Email Address:	lisa.schofield@doc.nj.gov	
Telephone Number:	O: (609) 298-6300 x2009	

Facility Health Service Administrator On-site	
Name:	Lisa Johnson
Email Address:	JohnsoL2@ubhc.rutgers.edu
Telephone Number:	609-298-6300 x 2455

Facility Characteristics	
Designed facility capacity:	1975
Current population of facility:	1057
Average daily population for the past 12 months:	1000
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-27; RHU 18-80
Facility security levels/inmate custody levels:	Max, Med, GM, FM
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	852
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	New Jersey Department of Corrections
Governing authority or parent agency (if applicable):	
Physical Address:	Whittlesey Road, PO Box 863, Trenton, New Jersey - 08625
Mailing Address:	
Telephone number:	609-292-4036 x5579

Agency Chief Executive Officer Information:		
Name:	Marcus O. Hicks, Esq.	
Email Address:	Marcus.Hicks@doc.nj.gov	
Telephone Number:	609-292-4036-5656	

Agency-Wide PREA Coordin	ator Information		
Name:	Pamela Sooy	Email Address:	pamela.sooy@doc.nj.gov

AUDIT FINDINGS

Narrative:

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

The New Jersey Department of Corrections entered a contract for the Prison Rape Elimination Act (PREA) auditing services with The Nakamoto Group. The sole primary auditor is Robert Manville, and no conflict of interest exists between the two parties. The contract explained the efforts toward transparency, the role of third parties and support staff, compliance considerations regarding the PREA Standards, Department of Justice certification requirements, enough time to conduct the audit, and planning for any corrective action phases. The agency and contracting staff determined that the agency would utilize the Online Audit System portal to complete the audit. The agency documents and the auditor documentation were uploaded on the PREA OAS system. The OAS system is a secure software platform that will prevent the transfer of personally identifiable information and provide the user to have the ability to upload documents and retain the documentation for future use. Before the on-site visit, the PREA Coordinator and facility staff uploaded agency and institution policies and supporting documentation, including the completed Pre-Audit Questionnaire, administrative reports, contracts, incident reports, memorandums, brochures, staff rosters, staffing plans, training information, and other reference materials for examination on the OAS system. Policies and documentation are in the form of agency directives and policies. Institution Supplements (IS) are provided in the form of Facility Directives. Updates of the Pre-audit questionnaire, investigations, and Institutional Supplements were also discussed before the beginning of the audit. The auditor reviewed the agency website for PREA reports and updated policies. The auditor reviewed the October 2016 Audit Report posted on the Agency website and notated all previously recommended corrective action responses. The website also included data collection reports from 2015 through 2020, and the auditor noted all statistical data throughout the review. A search of any litigations, facility information, was also reviewed on a Google Search. A discussion was conducted by the PREA coordinator, the Nakamoto Group, and me on time, expected to complete the audit and corrective action requirements. It was determined that it would be a three-day audit due to the population demographics. Upon arrival at the facility, an inbriefing meeting was held with the Warden, Agency PREA Coordinator, several department heads and support staff, facility PREA compliance manager. The standards used for this audit became effective August 20, 2012.

A total of twenty-eight (28) randomly selected correctional staff members were interviewed, including employees from the day and night shifts. Lieutenants from all shifts were included in the interview process as part of the specialized staff. Four of the officers assigned to the minimum-security unit were interviewed. Each officer was able to articulate the training they have received documented in the PREA questionnaire. All staff members have been trained on Cross-Gender searches. All staff indicated that while trained, they have not conducted a pat-down search on persons of the other gender. Most staff could explain exigent circumstances when they may be required to conduct a cross-gender pat search.

Specialized staff members were also interviewed. Specialized staff not assigned to the facility were interviewed. This includes NJDOC Director and NJDOC PREA Coordinator. The Director of Policy and Planning provided the memo to cover questions related to contracting facilities. A community-based Victim Advocates, a SANE provider, and a medical center where SANE examination occur were interviewed.

On-site interviews included the Warden, Major, Institutional PREA Compliance Manager (PCM), four Investigators, Human Resource Specialist, Intake staff, Health Services Administrator, Mental Health Director, Chaplain, staff responsible for monitoring for retaliation, screening staff from medical section and PREA compliance manager, 2 contracting medical staff and randomly five staff that would be non-correctional staff first responders.

Targeted population

Transgender 0
Allegation of Sexual Abuse 1
Allegation of Sexual Harassment 2
Victimization 3
Gay 2
Segregation for PREA 0
Disabled 1
Deaf 0
Cognitive 3
5
LEP 4

Total Random Inmates 29 Correspondence 0.

Total Interviews 43

The inmates were interviewed using the Department of Justice protocol interview questions. Overall, the inmates interviewed were well informed about the PREA reporting process, their rights to be free from sexual abuse, and how to report sexual abuse or sexual harassment. No inmates refused during the inmate interview process.

Staff File Review:

The auditor requested random personnel background checks and reviewed 15 employee training records, two contractor files, and two volunteer files. The employee records included five staff members who were recently hired, five of the staff were promoted, and five who have over five years tenure. Employment background checks are completed and are maintained on file at the facility. Human Resources is responsible for the initial background check, and SID is responsible for the background of staff with over five years tenure. The contractor files had the same email indicating background clearance and contained PREA training documentation. Volunteer files were also reviewed and had the same background clearance and PREA training documentation.

Resident Files:

Fifteen offender files were reviewed. The file contained Intake Screening, Intake PREA notification, initial PREA information, and formalized

PREA education. The rescreening is conducted during the offender's classification committee for offenders that remain at the facility. Rescreening is conducted by the receiving offenders of inmates that are moved from the Reception and Diagnostic Unit. The classification committee reviews any new information, or any information developed while housed at the facility. Several of the residents did not have the documentation of the rescreening, and the agency implemented a corrective action plan for the classification committee to document the rescreening. The facility updates or completes rescreening throughout the offender's stay at the facility.

Staff Training:

The auditor requested specific and some random training files for employees. Including in the specific list was training staff, Superintendent,

PCM, Medical staff, Mental Health staff, and fifteen random officers. All training records contained yearly training. Specialized staff had received yearly training specific to their duties.

Investigations:

There were 44 allegations of sexual abuse or sexual harassment investigations conducted during the audit period at the facility. Twelve of these investigations were for Sexual abuse. No SANE examinations were conducted during the last 12 months. All investigations were completed by trained Sexual Abuse in Confinement. The auditor reviewed 24 of the investigations, including all sexual abuse investigations.

AUDIT FINDINGS

Facility Characteristics:

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

Garden State Youth Correctional Facility is a New Jersey Department of Corrections state prison initially designed to house young adult offenders ages 18-30. The prison consists of the main institution and a minimum-security complex located on institutional grounds in the Crosswicks section of Chesterfield Township in Burlington County, NJ.

The facility houses offenders that are minimum, medium, close and maximum security.

The Main Campus is a circular type facility with a main corridor with living units located around this circular design. Each housing unit has a control room that is located above the living area to provide an optimal view for correctional staff overseeing the movement. The living units consist of two floors of two-man wet cells. There is a large day room located in the living unit. Within the day, rooms are televisions, telephones, JPay machine and desk, and chairs. Each of the living units has shower and dressing rooms located on each floor. Inmates are allowed to shower and change clothing without being seen by staff of the other gender due to curtains located at each showering area. Upon entering each dormitory, the following signs were displayed on a bulletins board framed on the walls. The PREA zerotolerance signs in both English and Spanish, Victim support services, reporting posters, and PREA audit notices were displayed. Each housing unit has separate populations demographics based on the needs of the facility's changing needs. There are cameras located throughout each living unit. None of the cameras provide privacy issues for inmates that are showering are utilizing the toilets. There is a notice of female officers working the unit located at the front of each living unit. The facility has provided visual aids for hearing impaired inmates.

One housing unit is dedicated as a Restrictive Housing unit. This unit manages offenders who are placed in the Temporary Housing Unit during an investigation. This includes intel gang information, assaults, or allegation of sexual abuse investigations. The average stay in the unit is less than 24 hours. The other living unit contains inmates that are in protective custody, disciplinary segregation, or administrative segregation. There is a total of 210 Restrictive Housing Unit beds.

The Receiving/Discharge area has an intake area for orientation and initial intake. Upon arriving at the facility, inmates are individually taken to an office for shakedown and issued clothing. There is a private room for the initial strip search and body scan. Only staff of the same gender conduct these searches. There are other offices located in this area that allow private interviews to be conducted. There were zero-tolerance posters displayed in the intake area.

The Health Services Department contains treatment rooms and offices. There is a bulletin board that contains PREA information located in the waiting area. There are correctional officers assigned to the health care area whenever inmates are in this area. The health unit is operational 24 hours a day with specialized staff on-call staff on duty. While cameras are located in the health services department, none of the cameras provided a view of the examination rooms. Rutgers University Medical Unit operates the medical unit.

The mental health staff's offices are in the program areas adjacent to the central corridor. This area contains offices, cubical, and group rooms. There is a bulletin board that contains PREA information located in the waiting area. There are cameras located throughout the mental health staff areas.

There are recreation areas located on this compound. These recreational areas include a gymnasium, activity center, exercise equipment, hobby craft rooms, and an outside recreation area. Zero-tolerance posters are located throughout the recreation area. The bathroom areas in each of the recreational areas include partitions and doors to provide privacy. There were PREA information boards in each of the recreational areas.

The Religious Services Department consists of a chapel area, group rooms, music area, and offices. There were PREA posters located in the religious services hallway and the front entrance area. There were no blind spots noted in this area.

The Food Service Department has a large dining room with a food service preparation area attached. Except for the staff dining room, all foodservice areas are constantly monitored with cameras, mirrors, or staff supervision. There are zero-tolerance posters in all food service areas.

The laundry is supervised by correctional staff and employs inmate workers. The laundry is under continuous supervision and is monitored by cameras and mirrors. There were no blind spots noted in the laundry. The laundry area had a bulletin board with PREA information, including zero-tolerance and PREA audit notices.

The Maintenance Department contains several working shops. There were cameras and mirrors located though out the area. There were no blind spots noted in the Maintenance Area. This area had a bulletin board with PREA information, including zero-tolerance and PREA audit notices.

The Visitation area allows contact visits. PREA zero-tolerance signs were posted in both English and Spanish, Victim support services, Third-party reporting/PREA Reporting, Notice of PREA audit were also posted in this area. There are cameras in the visitation room. There were no cameras located in a private area to search offenders before and after visitations.

Any areas that would be utilized to conduct strip searches were marked. There were privacy panels attached to the wall that would pull out and the provided privacy for strip-searched offenders. During the review of all cameras located at the facility, it was noted that none of the shake-down partitions could be viewed by the person reviewing the cameras. A review of all cameras found that all were operational, and none provided any privacy concerns.

The Education area contains classrooms and supports services. The Education department provides various programs for the inmates, including:

- General Educational Development (GED)
- Adult Continuing Education (ACE)
- Advanced Occupational Education
- Release Readiness Program
- · Law Library
- Leisure Library

The facility is being retrofitted to house Reception and Diagnostics for a larger area of New Jersey. In order to accomplish this task, some living units are being converted to office spaces. On the date of the audit, there were 996 offenders, including the Reception and Diagnostic Units. However, the population will vary from 150 to 200 inmates determined by receiving and transferring inmates on any given day.

The facility has also assumed a greater role in housing mental health inmates and has added to the staff to provide supervision and mental health services. Some of the two-man cells are being utilized as one-man cells, and the actual rated capacity is being reviewed to determine the actual population.

Located on the Complex is a minimum-security unit that houses a total capacity of 200 minimum-security inmates. This unit consists of two dormitories with a control area located in between the two dormitories. Each dormitory has a toilet, shower, and washbasin area with curtains to allow inmates to shower and use the toilet without being seen by staff of the other gender. The same PREA information was noted on each bulletin board. An inmate assigned to the minimum custody inmate population performs jobs on facility grounds, other state facilities, and community work sites

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). 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:	2
Number of standards met:	43
Number of standards not met:	0

Standard:115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

The PREA coordinator works with a staff of motivated, trained PREA support persons who provide additional resources in the agency meeting and establish a Sexually safe environment for staff, contractors, and offenders. The facility staff interviewed acknowledged and understood the zero-tolerance policy and the specific Prison Rape Elimination Act policy. Policies and directives outline procedures and expectations related to the NJDOC approach to preventing, detecting, and responding to sexual abuse and sexual harassment. It is developed in compliance with the PREA standards for adult prisons and jails and includes definitions of prohibited behaviors regarding sexual assault and sexual harassment for staff and inmates.

Standard: 115.34 - Specialized training: Investigations

Compliance was determined by reviewing agency policies on investigator training, PREA investigator files, investigator training files, and interviews with the onsite investigators. An exceeds determination was based on the review of the SID training records and knowledge of community-based investigative procedural training programs provided by SID and local prosecution teams

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11 Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

IMM.001.004 (Zero Tolerance Policy: Prison Sexual Assault)

PCS.001.PREA.EMS (PREA E-Management System)

PCS.011.Community Programs

PCS.001.008 PREA.PREA Compliance

Organization Chart

IMM.001.004 (Zero Tolerance Policy: Prison Sexual Assault) and PCS.001.008 PREA.PREA Compliance establishes the responsibilities of implementing a zero-tolerance policy for prohibiting, preventing, detecting, responding to and investigating inmates' sexual abuse and sexual harassment. The facility has a detailed policy and organizational chart the auditor was provided during the pre-audit phase of the audit. The policy and organization chart clearly designates an agency-wide PREA Coordinator. The PREA Coordinator is part of the agency management team. Interview with the PREA coordinator indicated she has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities. The PREA coordinator works with a staff of motivated, trained PREA support persons that provide additional resources in the agency meeting and establishing a Sexually safe environment for staff, contractors, and offenders. The facility staff interviewed acknowledged and understood the zero-tolerance policy and the specific Prison Rape Elimination Act policy. Policies and directives outline procedures and expectations related to the NJDOC approach to preventing, detecting, and responding to sexual abuse and sexual harassment. It is developed in compliance with the PREA standards for adult prisons and jails and includes definitions of prohibited behaviors regarding sexual assault and sexual harassment for staff and inmates.

The agency has established a system to develop well-documented staffing plans based on the level of supervision and services provided. The staffing plan establishes a mandate that facilities document non-compliance with the minimum staffing and a corrective action plan to rectify the noncompliant staffing.

Contracting facilities are mandated to utilize the agency policy on Sexual Abuse and Sexual Harassment and maintain compliance with PREA. The agency monitors these private providers for compliance with PREA.

The policy also included sanctions for staff and inmates found to have participated in prohibited behaviors. Staff members who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with Employee Discipline policy and Facility Rule of Conduct and subject to employment termination. Employees are subject to criminal prosecution.

The policy includes a description of the agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. Inmates who are found to have perpetrated sexual abuse or sexual harassment are disciplined in accordance with

sanctions outlined in the facility's inmate handbook.

NJDOC memorandum, warden memorandum, and a facility organizational chart meet the requirements of this standard. The agency's zero-tolerance against sexual abuse is clearly established, and the policy outlines the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment allegations. The agency memorandum establishes a position of PREA compliance manager with the responsibility to oversee the implementation and management of the Prison Rape Elimination Act of 2003.

The agency policies outline a zero-tolerance policy for all forms of sexual abuse and sexual harassment. Inmates are informed orally about the zero-tolerance policy and the PREA program during in-processing and additional admission and orientation presentations. The orientation is offered in English and Spanish. Additional program information is contained in the A&O Handbook, and postings are distributed throughout the facility (observed during the tour). All written documents are available in English and Spanish. Additional interpretive services are available for inmates who do not speak or read

English. Both institution staff and inmates are provided with many opportunities to become aware of PREA policies and procedures. All employees receive initial training and annual training, as well as updates throughout the year. The institution meets the standards with all the programs they have implemented to ensure the inmates and staff understand zero-tolerance. Exceed compliance was determined by reviewing orientation PowerPoint presentations, posters, A&O handbook, and interviews with staff, contractors, volunteers, and inmates.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PREA Audit of Contracting Facilities and Center
	PCS.011.Community Programs
	Memo From Contracting Staff
	IMM.001.004 Zero Tolerance Policy:
	The agency and facility meet the mandates of this standard. A review of the documentation submitted substantiates that the agency and facility require the entities which they contract for the confinement of inmates to adopt and comply with the PREA standards. All agency contractual agreements were modified effective February 1, 2013, to incorporate the language requiring contractors to adopt and comply with PREA standards. State of New Jersey Department of Corrections (NJDOC) Policy Number IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault mandate that it is the policy of the NJDOC to maintain a zero tolerance toward all forms of inmate sexual abuse/inmate sexual harassment. The NJDOC will respond to, investigate, and support the prosecution of inmate sexual abuse and sexual harassment within the correctional system and externally in partnership with state and local authorities. This policy and procedural statement are inclusive of all contracting entities.
	The PREA coordinator coordinates all new bids for confinement with NJDOC contracting offices. The Director of NJDOC office of policy and planning issued an interoffice memo to contracting offices that upcoming contracts would be mandated to include all areas of PREA compliance including PREA auditing both internally and externally and noncompliance could result in termination of any contracts. Compliance was determined by review of contracts, direction for contract renewal, review of 5 random contracting facility web search that determine the facility was PREA compliant.

115.13 Supervision and monitoring Auditor Overall Determination: Meets Standard Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

PCS.001.008 PREA.PREA Compliance

CUS 110.011 (Searches of Inmates and Correctional Facilities);

CUS.001.SEA.001 (Searches);

Trick Analysis/Baseline Custody Staffing

Post Trick Analysis/Baseline Custody Staffing requires that using the established Post Trick Analysis for each facility/unit a baseline custody staffing level shall be developed. The baseline staffing level shall be used to determine the amount of custody staff members that are required to operate a facility/unit on any given day and shift. Using this baseline custody staffing as a starting point the custody-working schedule for each day and shift is developed. Each facility/unit within the Department of Corrections has an authorized baseline custody staffing level established by the Commissioner in accordance with the facility's/unit's Post Trick Analysis. The Post Trick Analysis for each facility/unit is promulgated and maintained by administrative staff designated by the Commissioner. Each facility/unit staffing analysis shall be recorded which shall be used to compute each facility's/unit's specific baseline custody staffing levels. Baseline Custody Staffing shall be used to document these staffing levels and any authorized changes to these levels. The facility provided staffing plans for the center and daily report of staff on duty. The staff on duty meet or exceeded the requirement noted in the facility's baseline custody staffing requirements. Interviews with executive staff revealed compliance with the PREA, and that other safety and security issues are always a primary focus when they consider and review their respective staffing plans. The facility is undergoing a mission change and the present staffing plan is under review by NJDOC to determine the need to reduce or increase the number of staff at the facility.

The institution has been provided with all necessary resources to support the programs and procedures to ensure compliance with the PREA standards. The audit included an examination of all video monitoring systems; inmate access to telephones; the JPay email system; staff interviews; and rosters. New Jersey Department of Corrections Policy IMM.001.004 Zero Tolerance: Prison Sexual Assault. Mandate routine management rounds and further prohibits staff members are prohibited from alerting other staff members that these rounds are occurring, unless such announcement is related to a legitimate operational function Supervisory and Administrative staff members routinely make unannounced rounds covering all shifts and these rounds are documented. Interviews with staff confirmed unannounced rounds to all areas of the facility are conducted on a weekly basis, with no warning to employees.

The institution meets the standards for supervision and monitoring ensuring that safety of staff and inmates takes priority. Compliance was determined by staff interviews conducted during the tour of all areas of the facility, to include the Lieutenants on all three shifts, Major, Human Resource Manager and correctional staff; reviews of documented staffing rosters, daily supervisory checks and facility workforce quarterly meeting records; and the examination of the video monitoring system, inmate access to telephones and the J Pay inmate email.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Garden State Youth Correctional Facility does not house youthful offender. If an offender arrives at the facility during diagnostic by mistake the are immediately transported to the Department of Juvenile Justice are held outside the facility until transportaion can be arranged. This would occurr within 2 hours.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

CUS.001.011 Searches of Inmates and Correctional Facilities

PCS.001.TGI 01 Transgender/Intersex Inmates

Gender staff assigned to living unit Posters

15 5-27 Knock and Announce Memo to IPCMs

Logbook of announcing female staff coming on the shift

Pre-Service Training- Training

Pre-Service Training Roster

IMM.001.004 (Zero Tolerance Policy: Prison Sexual Assault);

Statement of Fact: Limits to Cross-Gender Viewing and Searches

New Jersey Department of Corrections Policy CUS.001.011 Searches of Inmates and Correctional Facilities establish a policy for the New Jersey Department of Corrections regarding the searches of inmates, including testing for prohibited substances and correctional facilities/organizational units within departmental control. Searches are conducted to detect and prevent contraband's introduction, recover missing or stolen property, and prevent escapes and other disturbances. Inmate searches shall be either pat searches or strip searches, as conditions require. Strip searches shall be conducted at a location where the search cannot be observed by unauthorized persons, in a professional and dignified manner, with maximum courtesy and respect for the inmate's person; by the number of custody staff deemed reasonably necessary to provide security, and by custody staff of the same gender as the inmate and may include a scanning/testing device Searches/physical examinations of transgender or intersex inmates shall not be conducted for the sole purpose of determining an inmate's genital status. If the inmate's genital status is unknown, it may be determined during conversations with the inmate, reviewing medical records, or, if necessary, by learning that information as a part of a broader medical examination conducted in private by a medical practitioner. A review of the intake area included private panels for an inmate strip search to be out of view of the person of the other gender. The auditor observed that each unit has individual shower stalls for privacy. The facility has implemented a policy that all opposite-gender staff working the units will announce themselves before walking the range to allow inmates the opportunity to prepare themselves from a privacy perspective. Most inmates interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by a staff of the opposite gender.

Staff and all the inmates interviewed indicated that employees of the opposite gender announce their presence before entering a housing unit. Additionally, the auditor observed written notifications, which clearly stated the possibility of opposite gender staff routinely entering the units posted in the unit common areas. Policy and memorandum provide documentation that the agency has a policy that staff of the other gender will know and announce their presence in entering an area of the other gender. The postings were written in both English and Spanish. Staff members were aware of the policy prohibiting the search of a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. During the past 12 months, no exigent circumstances required cross-gender viewing of an inmate by a staff member. Staff training curriculum includes training on conducting a cross-gender pat search. The dormitory areas have showers with curtains provided for inmate privacy while showering.

NJDOC has established policy PCS.001.TGI 01 Transgender/Intersex Inmates. This policy addresses the need to manage transgender and intersex inmates in a manner consistent with PREA standards and in accordance with departmental regulations, policies, and procedures. As part of the PREA Risk Assessment intake screening in the Electronic Medical Record, inmates will be asked to disclose their gender identity. If they answer in the affirmative, they will be asked what gender they identify. Inmates are not required to disclose their gender identity; Inmates that elect to disclose their gender identity, who identify as transgender, intersex, or as a gender other than the birth gender indicated in the court record, will be offered a determination of the housing that is most accommodating on their needs. PREA Institutional Compliance Managers receive a weekly list of inmates identified as transgender/intersex via OIT's PREA Management e-mails. A report of identified inmates may also be run on-demand through the PREA Management Application located on the NJDOC Intranet. Inmates may disclose that they are transgender at any time during their incarceration.

Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas, and interviews with staff and inmates, it has been determined that GSYCF complies with this standard

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

Use of the Language Line

PCS.001.DFH.01 Deaf/Hard of Hearing

Form- Tdd Phone Call Form

ADA form 100

Deaf and HOH Inmate ID Waiver

Preferred Method of Communication

Form to determine language

SUR . 004. 001 :Limited English Proficient :Language Assess

PCS.001.008 PREA.PREA Compliance

PCS.001.008 PREA. PREA Compliance mandate that inmates with disabilities and inmates who are limited English shall not discriminate against offenders with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this Directive. The facility has multiple ways to communicate with offenders, and established was for inmates to communicate with staff. Inmates are allowed to place magnets on their doors to indicated they are deaf. During intake, inmates are asked their preferred way to communicate. Inmates may sign up for the use of the TDD telephone if needed.

The facility houses a mental health program that includes several offenders that are cognitively disabled. The mental health staff is aware of these offenders before arriving at the facility. The mental health staff conducts their initial PREA screening and rescreening. They are also responsible for conducting the PREA training program for these and all mental health residents. Two of the cognitive offenders were interview. Each was aware of the PREA rules and how to report allegations of sexual abuse or sexual harassment.

Upon identifying an inmate with a disability that prevents them from reading or understanding inmate PREA educational materials, staff conducting initial intake screenings coordinate with other staff as needed to obtain appropriate accommodations addressing the inmate's disability (i.e., referral to medical as appropriate).

Through policy and practice, the facility staff ensures that inmates with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The disabled inmates interviewed stated they were instructed about PREA compliance and felt safe from sexual abuse. All PREA related information (written information), including postings, brochures, and handouts, are available in English and Spanish and translated to other languages. Staff also may read information to inmates when necessary. The facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants in performing first responder duties or during the investigation of an inmate's sexual abuse/sexual harassment allegations. Interviews with first responders, medical, mental health, and investigative staff confirmed their awareness of the prohibition of using inmate interpreters for PREA compliance functions. Compliance with this standard was confirmed by reviewing Agency Policy, Institutional supplement, contracting services for language interpretation services, and interviews with staff and disabled inmates

115.17 Hiring and promotion decisions **Auditor Overall Determination:** Meets Standard **Auditor Discussion** POLICY AND DOCUMENT REVIEWED: PCS.001.008 PREA.PREA Compliance **PREA Interview Questions** 15 Personnel Files 5 Volunteer Files 5 Contractor Files PCS.001.008 PREA. PREA Compliance mandate that the Department of Corrections will not hire or promote an individual or enlist the services of any volunteer or contractor to work within a DOC facility before completing a pre-employment screening identify if the individual has engaged in institutional or community sexual abuse or sexual harassment, or whose criminal history reveals a history of sexual misconduct. The DOC will screen all individuals identified for possible assignment to a DOC facility and current staff members considered for promotion. Hiring and promotion decisions require that all employees, contractors, and volunteers have completed criminal background checks. The facility does not hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor or volunteer that may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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 if the person has been civilly or administratively adjudicated to have engaged in the activity. Incidents of sexual harassment are considered in determining whether to hire or promote anyone or enlist the services of any contractor or volunteer who may have contact with inmates.

facility staff asked applicants and employees who may contact inmates directly about previous misconduct; they use a form to

document. The facility also imposes upon employees a continuing affirmative duty to disclose any misconduct related to PRFA.

The policy prohibits staff from material omissions and the provision of materially false information. This may result in grounds for

termination. Interviewed HR staff confirmed that the facility would provide employment information, including detailed employee

information substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer who may request this information.

Policies and staff interviewed stated that the facility requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates Policy requires that before hiring new employees who may have contact with inmates, the agency performs a criminal background check; and consistent with Federal, State, and

local law, do its best to contact all prior institutional employers for information on substantiated allegations of inmates or detainee sexual abuse or harassment or any resignation pending an investigation of such allegations. GSYCF requires the facility not to hire or promote anyone who may have contact with inmates and does not enlist the services of any contractor who

may have contact with inmates as listed in this standard to include the following provisions as stated in the PREA standards:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; to

include persons who are mentally ill or disabled or retarded or chronically ill or handicapped, or institution providing skilled nursing or intermediate or long-term care or custodial or immaterial care.

2. 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

3. Has been civilly or administratively adjudicated to have engaged in the activity described in subsection.

Employees must disclose such misconduct. Material omissions regarding this type of misconduct would be grounds for termination. The submission of false information by any applicant is grounds for not hiring the applicant. The human resource manager confirmed that the agency attempts to contact prior employers for information on substantiated allegations of sexual

abuse or resignations which occurred during a pending investigation of sexual abuse. Interviews with staff and a review of documentation (PREA Screening Form) confirm compliance with this standard. The human resources manager conducts all NCIC checks and documents the information in the personnel files. Five new staff members and five promoted staff personnel

files and staff with over five years tenure were reviewed and found to have completed prior to employment or promotion. A sample of NCIC notification of arrest was provided to verify the Agency notification system

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	SUP.001.000 Capital Planning and Construction MGO.
	Physical Plant Diagrams
	CUS.001.CRP.01 Camera Review Procedures.
	Statement of Fact
	SUP.001.000 Capital Planning and Construction requires that when designing or acquiring any new facility and in planning and substantial expansion or modification of existing facilities, the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. Interviews with the PREA Compliance Manager and Warden indicated that was no major expansion during the past four years. The facility Management Team indicated when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the plan will consider how the technology may enhance the facility's ability to protect inmates from sexual abuse. Since the operationalizing PREA the warden and his team discussed a list of modifications that have occurred in each program to comply with PREA. The facility is modifying exiting areas of the facility to accommodate the expand missions. In each of these modifications the executive that includes the PREA compliance manager are determining blind spots, needs for cameras and staffing requirement to achieve the mission. The agency has updated the cameras as technology improves camera and monitoring capabilities. During the tour of each facility, staff discussed where modifications have been implemented to enhance the safety of the facility.
	Compliance was determined by review of camera system, interviews with Warden and reviewing yearly staffing and upgrade plans.

115.21 Evidence protocol and forensic medical examinations

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MED.MLI.007 Sexual Assault.pdf MED.

MLI.005 Forensic Specimens

MED.MHS.002.001 - Emerg. Mental Health

MED.MHS.002.010 - Counseling Services-Sexual Assault

Sexual-Assault-Victims-Bill-of-Rights

ADM.SID.035 Investigation Procedures

CUS.001.CSM.01 Crime Scene Mngt

SID IMP #014 Sexual Offenses

NJSA 52, 4B - 50

SART-SANE Program

Contact Burlco

2018-SART-Summary

Attorney General Standards for Providing Services to Victims of Sexual Assault

PCS.001.008 PREA Compliance

Routinely, trained investigators (SID) who are full-time employees of the facility conduct all investigations. The local county prosecutor's office investigators may also be involved in criminal investigations. A review of training records confirmed that the SID staff members had received training on investigating sexual abuse and harassment in confinement settings. An investigator assigned to the facility and an investigator from the NJDOC central office were interviewed and confirmed compliance with this standard. Staff members were aware that the Special Investigative Division (SID) staff conducted investigations relative to sexual abuse allegations. The agency follows a similar uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." Victims of sexual assault are referred to health services for initial examination and treatment. Such treatment would be for life preservation only, and the victim would be transported to a local hospital for further examination, treatment, and forensic evidence gathering by a SANE (Sexual Assault Nurse Examiner) trained nurse. These services are required by state law and do not require a Memorandum of Understanding or similar agreement. A legally mandated SART (Sexual Abuse Response Team) would also be activated. All sexual abuse advocacy, examinations, treatment, testing, and follow-up care are provided without cost to the victim. The facility also has access to a local victim advocacy organization if needed. Mental health staff members may also act as victim advocates. The appropriate staff may provide follow-up mental health services. Routinely, trained investigators (SID) who are full-time employees of the facility conduct all investigations. The local county prosecutor's office investigators may also be involved in criminal investigations. A review of training records confirmed that the SID staff members had received training on investigating sexual abuse and harassment in confinement settings. Four investigators assigned to the facility or NJDOC central office were interviewed and confirmed compliance to this standard.

Rutgers University Health Care Services manage health Care Services at Garden State Youth Correctional Center. Health Services Unit Internal Management Procedures MED.MLI.007 Sexual Assault mandates that the healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department adequately equipped to assess (i.e., SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling, and gathering of forensic evidence. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before transferring to the appropriate community facility. Such care may include controlling bleeding or stabilizing other injuries incurred, but most frequently would involve emotional support and understanding. All forensic medical examinations are conducted by SAFE/SANE staff at Virtual Memorial Hospital. An interview with the hospital representative verified that the Hospital had access to trained staff to conduct forensic examinations. The representative

indicated that a SAFE/SANE is available 24 hours a day.

There were no forensic examinations conducted during the past 12 months. The Burlington Rape Crisis Center, a victim advocacy group, would respond to forensic examinations of persons, including offenders. Burlington County Rape Crisis Center has an MOU with Garden State Youth Correctional Facility and a local prosecutor to respond to sexual assaults and provide a SANE/SAFE staff member to respond to the hospital to conduct forensic examinations. SID has a responsive plan #035 Investigation Procedures that include reporting to the facility, arranging for inmate transportation, notification of the prosecutor's SART, and beginning the initial onsite investigations. Burlington County Rape Crisis Center was contacted, and provided validation of the services provided by Burlington County Rape Crisis Center maintains a relationship with Prosecutor's SART and NYDOC SID. Mental Health Services Internal Management Procedures Emergency Mental Health Services MED.MHS.002.001 mandates that all incarcerated individuals under the jurisdiction of Burlington County Rape Crisis Center the Department of Corrections will have access to emergency mental health services that shall include counseling services for assault victims, including victims of sexual assault, in compliance with PREA standards. Mental Health Services Internal Management Procedures MED.MHS.002.010 Counseling Services for Victims of Sexual Assault mandates that all incarcerated individuals under the control of the Department of Corrections will have access to Mental Health Services which shall include, but not be limited to, counseling by trained mental health services staff, for inmates who are victims of sexual assault, in addition to counseling offered by the emergency department of the hospital to which the inmate is referred. Mental health professional staff will not gather forensic information related to names, dates, or circumstances surrounding the assault.

Compliance with this standard was confirmed by interviews with the SID director, Medical Director, Mental Health Director, and Burlington County Rape Crisis Center staff

115.22 Policies to ensure referrals of allegations for investigations Auditor Overall Determination: Meets Standard Auditor Discussion POLICY AND DOCUMENT REVIEWED:

Sexual-Assault-Victims-Bill-of-Rights

ADM.SID.035 Investigation Procedures

CUS.001.CSM.01 Crime Scene Mngt

SID IMP #014 Sexual Offenses

Attorney General Standards for Providing Services to Victims of Sexual Assault

PCS.001.008 PREA Compliance

ADM.006.SID.002 Arrest Procedure

ADM.006.011 Investigations by SID

Trained investigators (SID) who are full time employees NYDOC conduct all investigations. The local county prosecutor's office investigators may also be involved in criminal investigations. A review of training records confirmed that the SID staff have received training on the investigation of sexual abuse and harassment in confinement settings. An investigator assigned to the facility and an investigator from the NJDOC central office were interviewed and confirmed compliance to this standard. Staff were aware that the Special Investigative Division (SID) staff conducted investigations relative to sexual abuse allegations. The agency follows a similar uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents". Victims of sexual assault are referred to health services for initial examination and treatment. New Jersey Department of Corrections Policy Statement ADM.006.011 Investigations by the Special Investigations Division mandate that NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by inmates, staff and other individuals who visit NJDOC facilities. The specialized training received by members of the SID helps to ensure that such investigations are conducted in a thorough, competent, objective manner and using the most current techniques and equipment possible. While remaining cognizant of the limitations and ramifications of the use of such investigatory techniques, any lawful techniques to perform an investigation may be used. There are multiple investigators in the NJDOC and one trained investigator at the institution. SID conducts the criminal investigations for the institution. There were forty four (44) allegation that was determined to be an allegation of sexual abuse or sexual harassment in the last 12 months. An investigation was initiated and completed in accordance with the PREA standards and agency policy for each allegations. At the time of the PAQ 39 investigations had been completed and 5 were pending. The documentation related to the investigations were contained in the SID files and was reviewed by the auditor.

The facility utilizes an IPCM Information Tracking Log to ensure all required steps of the investigation are completed and are timely. The tracking log is maintained by the SID.

The information contained in the log includes the date of the allegation, name of the victim/perpetrator, Segregation placement/reviews, initial two-day after-action review, full protocol, investigation outcome/date, date inmate notified of outcome and retaliation monitoring. Interviews with SID director and the local investigators, as well as an examination of supporting documentation, confirm the facility's compliance with this standard.

Compliance was determined by review of the investigative files, information log and interviews with four (4) SID investigators.

15.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Policy
	PCS.001.008 PREA Compliance
	Signed 3-17-21 Final NJ PREA Staff Reporting Quad fold.
	ADM.010.004 - Staff-Inmate Over Familiarity
	Signed 3-17-21 Final NJ PREA Staff Reporting Quad fold
	10.19 (E) Prison Rape Elimination Act June 2017
	Training Files
	All staff PREA training and protocol for sexual abuse prevention, intervention, reporting, protecting the inmates, and preserving the possible crime scene. Pre Service Training includes:
	§ A zero-tolerance policy for sexual abuse and sexual harassment
	§ How to fulfill staff responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
	§ Inmates' right to be free from sexual abuse and sexual harassment.
	§ Employees' right to be free from retaliation for reporting sexual abuse and sexual harassment.
	§ Dynamics of sexual abuse and sexual harassment in confinement.
	§ Common reactions to sexual abuse and sexual harassment victims.
	§ How to detect and respond to signs of threatened and actual sexual abuse.
	§ How to avoid inappropriate relationships with inmates.
	§ How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex or gender nonconforming inmates.

- § How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- § How to conduct Gross Gender Pat Searches

Newly hired employees receive training relative to the PREA standards during their initial training in a classroom setting. Yearly refresher training is required for all staff, utilizing a Computer-Based PREA training program. Contractors and volunteers are provided training relative to their duties and responsibilities by the facility PREA Compliance Manager. A review of the training curriculum, training sign-in sheets, and other related documentation, as well as staff interviews, confirmed staff is required to acknowledge, in writing, not only that they received PREA training, but that they understood it. A review of documentation and staff interviews confirmed that the facility is compliant with this standard.

Staff assigned to the segregation unit received specialized training for segregation units and are required to take the gender specific training.

A sampling of staff annual training files (15) was reviewed and found to contain documentation supporting compliance with this standard. All staff interviewed indicated that they had received the required PREA training initially and annually. Officers receive additional PREA training/updates when needed and officers assigned to the restrictive housing unit also receive additional training. A review of the shift pass on log found PREA training and tabletop drills for Sexual abuse and coordinated response plans on each shift at least quarterly. The extensive training provided and the staff's knowledge of the PREA requirements confirmed that the facility exceeds compliance with this standard. Shift supervisor's and staff provided documentation of shift briefing training that is provided on an ongoing basis.

115 00	Valuation and contractor training
115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Policy
	PCS.001.008 PREA Compliance
	Signed 3-17-21 Final NJ PREA Staff Reporting Quad fold.
	ADM.010.004 - Staff-Inmate Over Familiarity
	Signed 3-17-21 Final NJ PREA Staff Reporting Quad fold
	10.19 (E) Prison Rape Elimination Act June 2020
	Non-DOC Staff Sign-out sheets
	PCS.001.VOL.001 Volunteer Services.
	NJDOC policy IMM.001.004 Zero Tolerance Policy to Prison Sexual Assault requires all contractors and volunteer are mandated to receive training prior to beginning to provide services at the facility and then annually. The training curriculum, training sign-in sheets and other related training documentation were reviewed by the auditor. Interviewed staff verified the requirement to acknowledge, in writing, not only that they received PREA training, but that they understood the training. Additional training pamphlets are provided to institutional staff and contractors. There are also educational material found throughout the facility that provides how to report allegations of sexual abuse or sexual harassment. Each volunteer receives a volunteer handbook that provides additional information of PREA. Compliance was determined by reviewing power point training presentation, training curriculum, review of staff training records, and interviews with staff. Contractor's records are maintained by the facility training staff. The Chaplain manage the volunteer training records. Volunteer training is conducted by facility training staff.
	Rutgers University provides contract health care for New Jersey State Prison. While the medical staff or contracting staff, they are required to receive background checks and training equal to NJDOC staff. Medical professional that are assigned duties at NJSP receive initial PREA new employee training and additional training through Rutgers University. Documentation for this training was provided in sign in sheet for staff and power point presentation of the additional training. Compliance was verified by interviews with training staff, volunteer coordinator, contractors, and volunteer. Further compliance was determined by reviewing training records of contractor and volunteers.
	A sampling of staff annual training files was reviewed and found to contain documentation supporting compliance with this standard. All staff interviewed indicated that they had received the required PREA training initially and annually. Two contract

nurses and a dental hygiene were interview and validated they receive PREA training.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Policy

PCS.001.008 PREA Compliance

Signed 3-17-21 Final NJ PREA Inmate Reporting Quad fold.

ADM.010.004 - Staff-Inmate Over Familiarity

Training Curriculum

State of New Jersey Department of Corrections IMM.001.004 Zero Tolerance Policy; Prison Sexual Assault address the mandates of this standard. NJDOC provides inmates with comprehensive and ongoing education on PREA and zero-tolerance of inmate sexual abuse and harassment through the following:

- · In-person orientation at reception
- · In-person orientation at assigned housing facility
- PREA video presentation at reception and assigned housing facility
- · Continuous PREA video presentation on inmate closed-circuit TV channel
- · PREA handbooks
- · J Pay PREA content
- · PREA section of facility handbook
- · PREA posters displayed throughout NJDOC facilities
- · In-person PREA presentations as scheduled
- Tier Rep meetings
- · PREA Reference handouts at annual classification reviews
- · PREA Reference handouts in visit areas
- PREA Reference handouts in law libraries

Additionally, informational materials regarding PREA rights and responsibilities, zero tolerance and reporting are available to inmates and family members. Inmates also receive written updates of PREA/zero tolerance information on an as needed basis and at least annually.

The facility puts forth its best efforts to educate the inmates regarding the PREA. Inmates receive information during the intake process, including a pamphlet and inmate handbook, printed in English and Spanish. A staff member goes over the pamphlet and inmate handbook during the first day of arriving at the facility. A staff member conducts an additional education program regarding the PREA for all inmates within 30 days of their arrival at the facility. The program includes definitions of sexually abusive behavior and sexual harassment, prevention strategies and reporting modalities. Inmates also view a comprehensive orientation video that explains the facility's zero-tolerance policy and covers the inmate's right to be free from sexual abuse, sexual harassment and retaliation. The inmates have access to a television channel dedicated to PREA training.

There is also a translation language line available to LEP inmates. The auditor was provided a random sampling of A&O Checklists/Signature Sheets to verify that inmates, admitted during the auditing period, received the SABPIP education and relevant written materials. All inmates are required to acknowledge completion of PREA education. During the interview process, randomly selected inmates indicated they received information about the facility's rules against sexual abuse/sexual harassment, when they arrived at the facility. They further indicated they were advised about their right not to be sexually abused/sexually harassed, how to report sexual abuse/sexual harassment and their right not be punished for reporting sexual abuse/sexual harassment. Inmates were aware of available services outside of the facility for dealing with sexual abuse.

Several inmates shared that PREA training was continuously provided. The determination that the facility meeting the requirements of this standard was based on reviews of the inmate education program, documentation of the training and interviews with inmates and staff.

115.34 Specialized training: Investigations Auditor Overall Determination: Exceeds Standard **Auditor Discussion** POLICY AND DOCUMENT REVIEWED: ADM.006.000 SID MGO and Organizational Structure Sexual-Assault-Victims-Bill-of-Rights ADM.SID.035 Investigation Procedures PCS.001.008 PREA Compliance ADM.006.SID.002 Arrest Procedure ADM.006.011 Investigations by SID GYCF Disposition - Out of Custody SID Training Files Course Curriculum The Special Investigations Division (SID), formerly known as the Internal Affairs Unit, is part of the Office of the Commissioner and is headed by the Chief Investigator, who reports directly to the Commissioner. The Chief Investigator must oversee all operations within the SID to ensure compliance with all State and federal laws and NJ Department of Corrections (NJ DOC) rules and regulations. SID investigators have duly sworn law enforcement officers who receive specialized training by the New Jersey Division of Criminal Justice. The SID's mission is to maintain the highest professional standard of proficiency in determining the facts relative to criminal and administrative investigations for the New Jersey Department of Corrections. To help achieve this, SID Investigators continue to undergo ongoing training utilizing the latest investigative techniques. SID serves as a liaison to federal, state, county, municipal, and other law enforcement agencies and provides cooperative assistance in investigations and other matters when appropriate. The SID staff received PREA specialized training before conducting PREA investigations. SID provided a copy of PowerPoint presentations on conducting PREA investigation. This auditor reviewed specialized training documentation, including the SID Course Completion List for Investigating Sexual Abuse in a Confinement Setting. Four SID staff were interviewed and found to be very knowledgeable of the PREA investigative process. Each investigator's training documentation was reviewed during the investigator's interview.

Compliance was determined by reviewing agency policies on investigator training, PREA investigative files, investigator training files, and interviews with the onsite investigators. An exceeds determination was based on the review of the SID training records and knowledge of community-based investigative procedural training programs provided by SID and local prosecution teams.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	MED.002.004 Mental Health Services Staff
	Medical Training Power point Pgs. 7-11
	Email from Dr Morris
	PRISON RAPE ELIMINATION ACT 2018
	Course Curriculum
	Rutgers University provides health care for New Jersey State Prison. Medical professional that are assigned duties at GSYCF receive initial PREA new employee training and additional training through Rutgers University. Documentation for this training was provided in sign in sheet for staff and power point presentation of the additional training. Power point presentation "Addressing Sexual Abuse & Harassment of Inmates" Medical and Mental Health staff training included advanced training for medical and mental health professional and addresses the mandates of this standard. The agency ensures all full- and part-time medical and mental health practitioners, who work regularly in its facilities, have been trained according to the practitioner's status in the agency. All mental health and medical staff have received the required specialized training on victim identification, interviewing, reporting and clinical interventions. Employees receive training annually and supporting documentation is on file. Medical and mental health care staff acknowledged, in writing, that they both received and understood the training, as it relates to the PREA. Interviews with medical and mental health staff confirmed awareness of their responsibilities regarding the PREA. All cases requiring the processing of sexual assault evidence collection kits are transported to local hospital. A review of the training documentation and staff sign in sheets confirm the facility's compliance with this standard.

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

MED.002.004 Mental Health Services Staff

IMM.001.004 Zero Tolerance Prison Sexual Assault.

PCS.001.008 PREA Compliance

PCS.001.TGI.01 Transgender and Intersex Inmates

MED.001.012 Medical Health Care Services

MED.IMA.005 Intra system transfer

CLS.002.INT.01 Classification Intake Procedures

MED.IMA.001 Health Appraisals at Reception

CLS.005.001 Review of Inmates by Classification and Review Committees

IMM.002.JPG.001 JPAY Guideline

PREA screening Form

CLS.002.001 Classification Intake Process

State of New Jersey Department of Corrections IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault Policies and procedures require the use of a screening instrument (reviewed by the auditor) to determine proper housing, bed assignment, work assignment, education, and other program assignments, to keep inmates at high risk of being sexually abused/sexually harassed separate from those inmates who are at high risk of being sexually abusive. Division of Operations Internal Management Procedure CLS.002.INT.001 mandates that staff shall be assigned to complete the Classification Intake Checklist and thoroughly review all of the inmate's Classification material and reports to ensure that all court/legal, sentence calculation, alerts (i.e., Category I, Non-Citizen, STG, PREA, etc.), objective classification scoring, custody level, parole/release, sex offender information, and category status is accurately recorded. CLS.005.001 Review of Inmates by Classification and Review Committees requires that classification or other specialized committee review the classification based on additional information. MED.IMA.001 Health Appraisals at Reception The New Jersey Department of Corrections mandates a comprehensive health appraisal of each new admission inmate, including medical history and physical examination, and identifying any inmate who is determined to be LEP and the languages they speak. This is to be completed within seventy-two (72) hours after admission to a reception facility. Qualified and trained healthcare staff members take the health history and vital signs, and the physical examinations are performed by a New Jersey licensed Nurse Practitioner, Physician Assistant, or Physician. All inmates committed to the custody of the NJDOC are assessed by healthcare staff for their risk of sexual victimization at intake at every facility and upon intra-agency transfer. This assessment can be updated due to a request, referral, or sexual abuse or harassment incident or if any new information relative to sexual victimization risk is obtained. The custody and classification staff use information from the Risk Assessment to ensure that potential victims and potential perpetrators are housed separately. Within the first 21 to 30 days of arriving at the facility, the classification meets with the inmate, discusses short-term and long-term program needs, reviews their first 21 to 30 days, and all new information that has developed or was received to ensure an appropriate treatment program. During the meeting, inmates are asked if they have any concerns for their safety, and a review of documents relative to any victim/predator behavior is conducted.

Agency policy prohibits inmates from being disciplined for refusing to answer or not disclosing complete information in response to questions regarding their mental/physical health, developmental disability, sexual preferences, sexual victimization history, and perception of vulnerability. Housing and program assignments are made case-by-case, and inmates are not placed in housing units based solely on their sexual identification or status. Interviews with classification committee staff and a random review of risk screening assessments support the finding that the facility complies with this standard. It was recommended that the classification note this information in the inmate's file for documentation in future audits.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	PCS.001.TGI.01 Transgender and Intersex Inmates
	MED.001.012 Medical Health Care Services
	MED.IMA.005 Intra system transfer
	CLS.002.INT.01 Classification Intake Procedures
	MED.IMA.001 Health Appraisals at Reception
	Agency and facility policy require the use of a screening instrument (reviewed by auditor) to determine proper housing, bed assignment, work assignment, education and other program assignments, with the goal of keeping inmates at high risk of being sexually abused/sexually harassed separate from those inmates who are at a high risk of being sexually abusive. Housing and program assignments are made on a case-by-case basis and inmates are not placed in housing units based solely on their sexual identification or status. New Jersey State Prison mandate in accordance with PREA standards, all inmates shall be assessed during an in-person intake risk screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. This occurs during the reception process and as inmates are transferred between facilities. Information from this assessment will be considered by classification committees and other responsible staff when making housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. PREA risk information shall not be disseminated to anyone other than to the extent necessary to make housing, bed, work, education, and programming assignments.
	Garden State Youth Correctional Facility mission has been modified to becoming one of the agency diagnostic centers. The Assistant Warden for Programs (PREA compliance manager) determines placement within the correctional system on inmates after completions of the diagnostic process. Transgender inmates are interviewed with Assistant Warden and other providers to determined placement. Transgender inmates may request placement in male or female correctional centers. Since the promulgation of this policy six (6) transgender inmates were interviewed by classification committee and determined they felt safer at a female facility and were transferred to a female facility. At the time of the audit there were no transgender inmates assigned to the facility and no transgender inmates were in the diagnostic center.
	The classification committee and case managers, meet weekly to review incidents, as well as screening instruments, rescreening instruments and status or at risk inmates that are permanently assigned to Garden State Youth Correctional Facility. Based on these meetings, the committee may request mental health intervention, victimization or predator rescreening and recommend other interventions, to include housing and job assignments. The determination of meets on this

standard was determined by the review of classification committee assessments of appropriate housing, job assignment and release goals, the committee's weekly meeting to review all incident reports, to include sexual abuse/sexual harassment

allegations and interviews with staff, inmates, the PREA Compliance Manager, medical and mental health staff.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	CLS.002.INT.01 Classification Intake Procedures
	MED.IMA.001 Health Appraisals at Reception
	IMM.002.003 Reasonable Accommodations
	ADM.019.003 Close Custody Units
	ADM.019.003.IHU Investigative Housing Unit.
	ADM.019.003.TAH Temporary Administrative Housing
	MED.002.001 Mental Health Services
	NJDOC Division of Operations Internal Management Procedure ADM.019. 003 Temporary Administrative Housing mandates an inmate shall be placed in temporary administrative Housing (TAH) for a period not to exceed 72 hours for evaluation and investigation.
	TCC may be utilized when a PREA allegation is received that requires victims be separated from perpetrators after all alternative means of separation have been assessed and no alternative means of separation are available (i.e. cell assignment/housing unit assignment change, intra-institutional transfer). Such assessment will occur within 24 hours of the allegation. The facility will document the reason for the separations.
	ADM.019.TCC.01 also provides for Placement in Temporary Close Custody as a result of a PREA allegation based on a case by case basis taking into account factors that include but are not limited to: the nature and severity of the PREA prohibited act, medical, mental health, disciplinary and investigatory considerations, an inmate victim's access to property, services and privileges that are afforded to general population inmates, and any circumstances that would pose a threat to the safety, security and orderly running of the correctional facility.
	If it is determined that an inmate requires placement in Temporary Close Custody status as a result of a PREA allegation, the reasons for the placement shall be documented. During the last 12 months there have been no inmates placed in Segregation for more than 30 days based on an allegation of sexual abuse.
	Policy mandates that when placed in TCC or Self Protective status inmates are provided Food, Grooming, Showering and Shaving, Medical Services, Personal Items, Correctional Facility Clothing, Bedding and Linen, Inmate Legal Services, Correspondence, Visits and Telephone Calls, Recreation. Education, Visits by Professional and Correctional Facility Supervisory Staff, and Work Opportunities equal to general population within limits to protect inmate. Inmates assigned to temparary housing for investigations will be reviewed daily. Afl other inmate in a segregation unit will be reviewed a minimum of once each month for assginment to special housing unit.
	Interviews with staff assigned to the Segregation units and inmates placed on segregation and examination of Segregation operations and an examination of policy/documentation confirm the facility's compliance with this standard.

Inmate reporting
Auditor Overall Determination: Meets Standard
Auditor Discussion
POLICY AND DOCUMENT REVIEWED:
PCS.001.008 PREA Compliance
Inmate Report Quad fold Signed Proof 3-11-21
21-05-11 PREA ENGLISH Inmate handout
21-5-13 ENG universal flyer Reporting
IMM.002.IRS.001 Inmate Remedy System
IMM.002.001 Inmate Remedy System
IMM.002.JPG.001 JPAY Guidelines
Allegations of Sexual Abuse, Assault, Harassment and Retaliation Reported to the Office of the Ombudsman
IMM.001.004 Zero Tolerance Policy:
New Jersey Department of Corrections Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault mandates many ways for inmates to report an allegation of sexual abuse or sexual harassment. Inmates who have been victimized or know of sexual abuse or harassment can immediately report an incident of sexual abuse/harassment directly to any custody or civilian staff member. Additional methods of reporting sexual abuse/harassment are NJ DOC Inmate Remedy System, NJ Office of the Corrections Ombudsman.
The inmate population can contact the Office of the Corrections Ombudsman toll-free by utilizing their IPIN and dialing 1-555-5555. Residents of the Special Treatment Unit may contact the Office of the Corrections Ombudsman toll-free by dialing 1-800-305-1811. Inmates and residents may also utilize the Office of the Corrections Ombudsman Request for Assistance form or send written correspondence to the office at P.O. Box 855, Trenton, N.J. 08625. Completed forms or correspondence can be sent to the Office of the Corrections Ombudsman via inter-office or regular mail. Inmates may use the free, confidential telephone hotline, complete the "Office of the Corrections Ombudsman Request for Assistance form," or send written correspondence to the N.J. Office of the Corrections Ombudsman. Correspondence may be sent interoffice mail with no postage required).
An inmate may report to Special Investigations Division in each facility and institutional PREA Compliance Manager. At NJSP, inmates have access to J Pay Kiosks to report sexual abuse or sexual harassment allegations. The facility often shows a video by television to remind inmates of reporting allegations of sexual abuse or sexual harassment.
Third parties on behalf of an inmate (family, friends, etc.) may utilize the NJ DOC Inmate Remedy System, which includes NJDOC SID - 609-826-5617 - for family members or third party on behalf of an inmate or contact the N.J. Office of the Corrections Ombudsman to report an incident of sexual abuse/harassment.
Compliance was determined by reviewing multiple posting around the facility for ways to report sexual abuse or sexual harassment, interviews with inmates, staff, and SID supervisors. Also, compliance was confirmed by testing the several phone numbers available to report sexual abuse or sexual harassment allegations. Staff members promptly accept and document all verbal, written, anonymous, private, and third-party reports of alleged abuse/sexual harassment.

115.52 Exhaustion of administrative remedies Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

IMM.001.004 Zero Tolerance Prison Sexual Assault.

PCS.001.008 PREA Compliance

IMM.002.001 Inmate Remedy System

IMM.002.JPG.001 JPAY Guideline

State of New Jersey Department of Corrections Policy Statement IMM.002.001 Inmate Remedy System mandate that inmates are provided a departmentally-approved procedure for resolution of grievances. To accomplish this, the NJ DOC has implemented a multi-level Inmate Remedy System. This process is designed to allow all inmates access to appropriate correctional facility administration to obtain information and for the review and potential resolution of grievances. The system is designed to provide a confidential route for inmates to make routine inquiries, to make the administration aware of issues that may exist within the correctional facility, and provide a method for positive interaction between staff and the inmate population. All allegations of sexual abuse/sexual harassment, when received by staff, will immediately be referred for investigation. Inmates are not required to use an informal grievance process and procedures to submit a grievance alleging sexual abuse/sexual harassment. Inmate are allowed to submit a grievance without submitting report to the staff(s) member who is the subject of the complaint. Additionally, policy also prohibits the investigation of the allegation by either staff alleged to be involved in the incident or any staff who may be under their supervision. Policy states that there is no time frame for filing a grievance relating to sexual abuse/sexual harassment. Allegations of physical abuse by staff shall be referred to the SID in accordance with procedures established for such referrals. Policy also addresses the filing of emergency administrative remedy requests. If an inmate files the emergency grievance with the institution and believes he is under a substantial risk of imminent sexual abuse, an expedited response is required to be provided within 48 hours. If an inmate reasonably believes the issue is sensitive and the inmate's safety or well-being would be placed in danger, if the remedy became known at the institution, the inmate may submit the remedy directly to SID. There is no prohibition that limits third parties, including fellow inmates, staff members, family members, attorneys and outside victim advocates in assisting inmates in filing requests for grievances relating to allegations of sexual abuse or filing such requests on behalf of inmates. Inmates may utilize the JPay system for filing grievances. JPay Inmate Remedy System consists of an Inmate Inquiry Form; an Inmate Grievance Form and an Administrative request. JPay grievances will be responded to within 30 days unless the administrative remedy coordinator determines that the grievance is urgent in which case inmates will be responded to within 5 work days.

There were nine (9) grievances filed involving PREA related issues during the past 12 months. There were no grievances alleging sexual abuse that involved an extension due to the final decision not being reached within 90 days. Additionally, there were no grievances alleging sexual abuse filed by inmates in which the inmate declined third-party assistance. Inmates are held accountable for manipulative behavior and false allegations. Disciplinary action would generally be taken if a grievance was filed in bad faith. Compliance was determined by review of policy and grievance logs, as well as an interview with the Grievance Coordinator and IPCM.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	21-4-1 Burlington English Emotional Support Poster
	21-05-11 PREA ENGLISH Inmate handout
	MOU with Burlington Rape Crisis Center
	Telephone Interview with Rape Crisis Center
	GSYCC has an MOU with Burlington Rape Crisis Center (BRCC). Before giving inmate access, the facility's extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities per mandatory reporting laws. In an interview with the victim advocate, she indicated she would encourage the inmate to report any allegation of sexual abuse or sexual harassment to the local authority; She also would advise the inmate that everything they talk about is confidential. In an interview with the BRCC, a Representative confirmed that the institution and victim crisis center has an MOU with the following MOU stipulations. BRCC provides an Emotional Support Poster that includes the service they would provide. The poster also provides the offenders with State and National support groups such as RANN. The facility provides an address inmates can write. In cases of an inmate going out for a SANE or SAFE evaluation, SID would advise BRCC, and BRCC would send a victim advocate to the hospital and offer their services. The victim advocate would also provide the inmate with information on emotional support services. The staff at BRCC receive 40 hours of training and yearly refresher training. There is a full-time staff that provides training and oversees the Victim Advocates. Compliance was determined by a review of the Posters and interviews with the Burlington Rape Crisis Center Director

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICIES AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	IMM.002.JPG.001 JPAY Guidelines
	Inmate Report Quad fold Signed Proof 3-11-21
	Office of the Corrections Ombudsman
	IMM.002.IRS.001 Inmate Remedy System
	IMM.002.001 Inmate Remedy System
	NJDOC Special Investigations Division,
	htttp//www/state/nj.us/corrections/pages/PREA.html
	TThe GSYCC provides a pamphlet (English and Spanish) and A&O Handbook (English and Spanish), including family reporting. The information included an address and telephone number. The information poster includes how family members, friends, attorneys, clergy, or another third party may make a PREA report on an inmate's behalf. Third parties may report sexual abuse/sexual harassment by Contacting the Correctional Facility's Institutional PREA Compliance Manager, contacting the NJDOC Special Investigations Division, (SID) (609) 826-5617 or by contacting the Corrections Ombudsman PO Box 855 Trenton, NJ, 08625 Phone# (609) 633-2596. Compliance was determined by reviewing posters located in the visitation room and throughout other facility areas, by calling the phone number on posters, and by reviewing the NJDOC website

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	PCS.001.VOL.001 Volunteer Services
	Office of the Corrections Ombudsman
	State of New Jersey Department of Corrections Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault NJDOC requires all staff to immediately report to his or her supervisor any knowledge, suspicion, or information regarding inmate sexual abuse, sexual harassment, retaliation against an inmate or staff for reporting an incident of sexual abuse, or any staff neglect or violation of responsibilities that contributed to an incident of sexual abuse or harassment or retaliation. An employee, contractor, or volunteer who fails to report an allegation or coerces or threatens another person to submit inaccurate, incomplete, or untruthful information with the intent to alter a report, may face disciplinary charges, up to and including dismissal, even on a first offense.
	State of New Jersey Department of Corrections Division of Programs and Community Services policy PCS.001.VOL.001 requires all volunteers must comply with the NJDOC's zero tolerance of sexual abuse and sexual harassment policy. Any volunteer who engages in sexual abuse shall be prohibited from contacting inmates and reporting to law enforcement agencies if such action constitutes a crime and to relevant licensing bodies. All volunteers are required to immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.
	Apart from reporting to designated supervisors or officials, staff shall not reveal information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Staff, contractors, and volunteers must report and respond to allegations of sexually abusive behavior, regardless of the source of the report

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	PCS.001.VOL.001 Volunteer Services
	Office of the Corrections Ombudsman
	ADM.019.003 Close Custody Units
	ADM.019.003.IHU Investigative Housing Unit.
	ADM.019.003.TAH Temporary Administrative Housing
	State of New Jersey Department of Corrections Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault addresses the mandate of this standard. Upon receipt of a PREA report or allegation, first-responding staff must immediately take reasonable steps to separate the victim from the alleged assailant to ensure the safety of all parties. Interviewed staff members were aware of their duties and responsibilities when they become aware or suspect an inmate is being or has been sexually abused or sexually harassed. All staff indicated they would act immediately to protect the victim, to include separating the victim/predator, securing the scene to protect possible evidence, preventing the destruction of potential evidence and contacting their supervisor or shift lieutenant and medical staff.
	In the past 12 months, there was 44 instances in which institution staff members determined that an inmate was subject to a substantial risk of imminent sexual abuse. A review of the investigation and interviews with the inmate and staff confirm that, according to the requirements of the standard, facility staff protect the inmate victim and separate victim from the alleged predator. According to interviews with Investigators the average stay was less than 24 hours.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	PCS.001.008 PREA Compliance establishes the institutional PREA Compliance Manager must accept reports that an inmate was sexually abused while incarcerated at another facility. The IPCM will advise the facility administrator and serve as administrator's designee in notifying the head of the facility/agency where the alleged abuse occurred no later than 72 hours after receiving the allegation. Procedures are in place that require the IPCM to immediately notify the Chief Executive Officer of the other confinement facility, in writing, of the nature of the sexual abuse allegation. There were one allegation of sexual abuse or sexual harassment reported during the last 12 months. The facility file related to the allegation was reviewed by the auditor.
	Compliance was determined by review of the investigative file and interview with the IPCM.

115.64 Staff first responder duties Auditor Overall Determination: Meets Standard Auditor Discussion POLICY AND DOCUMENT REVIEWED: PCS.001.008 PREA Compliance IMM.001.004 Zero Tolerance Policy:

CUS.001.CSM.01 Crime Scene Mngt

ADM.SID.035 Investigation Procedures

Sexual-Assault-Victims-Bill-of-Rights

ADM.SID.035 Investigation Procedures

SID IMP #014 Sexual Offenses

ADM.006.SID.002 Arrest Procedure

New Jersey Department of Corrections Policy IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault addresses the mandate of this standard. All interviewed staff members were highly knowledgeable concerning their first responder duties and responsibilities upon learning of an allegation of sexual abuse/sexual harassment. Staff indicated they would separate the inmates, secure the scene, prevent the destruction of any evidence and contact the shift Lieutenant and medical staff. The Lieutenant would protect the victim and notify medical and mental health staff, SID, and administrative/executive staff.

The Facility Administrator will report this to SID, and a determination will be made if there is sufficient forensic evidence to transport to the Emergency Department. In all cases, the physical health of the inmate will take precedence over forensic needs. SID and custody will make the necessary arrangements to rendezvous at the Emergency Department as required. The Emergency Department will be contacted, and transport to the Emergency Room will be arranged per MED.EME.005 Emergency Response.

The Facility Administrator should be notified when transportation to the Emergency Room to ensure proper notification of SID. In all cases, SID will arrange for the collection of forensic materials at the Emergency room. The alleged assaulted inmate will be transported to an Emergency Room for prophylaxis, treatment, and gathering of evidence, which also mandates that the healthcare staff follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department adequately equipped to assess (i.e., SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling, and gathering of forensic evidence. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before transferring to the appropriate community facility.

Such care may include controlling bleeding or stabilizing other injuries incurred, but most frequently would involve emotional support and understanding. In the past 12 months, there were twelve (12) allegations that an inmate was sexually abused. There were two (2) allegations in which a first responder separated the victim and the abuser, secured the scene, and contacted medical staff and SID. SID Internal Management Procedures Procedure #014 Sexual Offenses provides a road map for first responders, institutional staff, and SID staff to follow to protect inmates, protect the crime scene, and conduct the

investigations.

The Special Investigations Division investigator will advise the Chief Investigator and administration of the investigation status

with continuing updates as the investigation continues. The County Prosecutor's Office will also be advised of the incident and the status of the investigation. Of these sexual abuse allegations, none were reported to non-security staff. Compliance was determined by reviewing the investigation file, interviews with the SID staff, medical staff, clinical psychologist, lieutenants, correctional staff, and random interviews with six non-security staff members on first responder's

duties	Compliance was	determined by	, reviewina	Investigative	Reports and	interview four	(4)	SID investigators
uuucs.	Compliance was	o detellillied by	I EVIEWIIIU	IIIVESIIUAIIVE	repuis and	IIIICI VICW IOUI	141,	JID IIIVESIIUAIUIS

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	CUS.001.CSM.01 Crime Scene Mngt
	ADM.SID.035 Investigation Procedures
	Sexual-Assault-Victims-Bill-of-Rights
	MED.MHS.002.001 - Emergency. Mental Health.

MED.MLI.005 Forensic Specimens

Level 3 IMP.524 Zero Tolerance Sexual Assault.

MED.MHS.002.010 - Counseling Services-Sexual Assault

MED.EME.005 Emergency Response

MED.MLI.007 Sexual Assault

Burlington Rape Crisis Center

GSYCF has a Coordinated response plan. All interviewed staff members were extremely knowledgeable concerning their first responder duties and responsibilities upon learning of an allegation of sexual abuse/sexual harassment. Staff indicated they would separate the inmates, secure the scene, prevent the destruction of any evidence and contact the shift Lieutenant and medical staff. The Lieutenant would continue to protect the victim and notify medical and mental health staff, SID and administrative/executive staff.

The Facility Administrator will report this to SID and a determination will be made if there is sufficient forensic evidence to transport to the Emergency Department In all cases, the physical health of the Inmate will take precedence over forensic needs. SID and custody will make the necessary arrangements to rendezvous at the Emergency Department as required. The Emergency Department will be contacted and transport to the Emergency Room will be arranged in accordance with MED.EME.005 Emergency Response. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility.

The Facility Administrator should be notified at the time of transportation to the Emergency Room to ensure proper notification of SID. In all cases SID will arrange for collection of forensic materials at the Emergency room. The alleged assaulted inmate will be transported to an Emergency Room for prophylaxis, treatment and gathering of evidence, also mandates that the healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department properly equipped to assess (i.e. SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling and gathering of forensic evidence.

SID Internal Management Procedures Procedure #014 Sexual Offenses provides a road map for first responders, institutional staff and SID staff to follow to ensure protections of inmates, protection of the crime scene and conduct the investigations.

The Special Investigations Division investigator will advise the Chief Investigator and administration of the status of the investigation with continuing updates as the investigation continues. The County Prosecutor's Office will also be advised of the incident and status of the investigation. If Mental Health staff are on duty they would report to the medical area to provide crisis intervention and emotional support.

The SID would notify the Victim Advocate that would send staff to the local hospital. Virtual Memorial Hospital has a SART team that would be available to provide SANE examination and work with the Victim Advocate as needed. Burlington Rape Crisis Center would continue to provide emotional support and facility mental health staff will provide follow up care as mandated.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy
	Final Agreement Local 30 15-19K
	IFPTE Contract 7-1-15 to 6-30-19
	NJLECOA contract settlement
	NJSOLEA 2015 - 2019 MOA (002)
	PBA Local 105 MOA 2015-2019.pdf
	SID Agreement 7-1-15 - 6-30-19.pdf
	State of New Jersey Department of Corrections Policy Statement IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault Staff mandates that staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse, sexual misconduct and sexual harassment policies, and for failing to report such conduct. The Collective Bargaining Agreements(CBA), examined by the auditor complies with this standard. The agreements do not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The Warden designee and IPCM were interviewed and verified information provided during the Pre- Audit Questionnaire. There were no incidents requiring protection for inmates from staff during the last 12 months. Compliance was confirmed through review of the Collective Bargaining Agreements and interviews with administrative staff from GSYCF and NJDOC.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy
	PPREA E-Management System PREA new incident Alerts/New incident alerts 45 days and 90-day reminders. The New Incident Alerts occur hourly each day, and the New Incident 45 Day Reminder and 90 Day Reminder alerts occur within the time frame of the established retaliation monitoring period. Recipients of the New Incident Alerts are Agency-Wide PREA Coordinator, Institutional PREA Compliance Manager, Head Quarter PREA Compliance Unit, and Rutgers Medical/Mental health recipients. Recipients of the 45 and 90 Day Reminder alerts are Agency-Wide PREA Coordinator, Institutional PREA Compliance Manager, and SID Recipients. The IPCM at the institution where the inmate resides shall monitor inmate disciplinary reports, performance reviews, and reassignments for staff to determine if there is any suggestion of possible retaliation. If there is a suggestion of possible retaliation, any evidence of possible retaliation must be referred to the SID for investigation, and the Agency-Wide PREA Coordinator must be advised of same. The IPCM shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. The policy prohibits retaliation against any staff or inmate who reports sexual abuse or sexual harassment or cooperates in related investigations. The PCM assistant is charged with monitoring retaliation. During the interview, she stated he follows up on all 30-60- and 90-day reviews to ensure the policy is being enforced and conducts periodic status checks on the frequency of incident reports, housing
	reassignments, and negative performance reviews/staff job reassignments. In the event of possible retaliation, IPCM indicated she would monitor the situation indefinitely. The monitoring for retaliation file included documentation of contacts with the Retaliation monitor and dates that the inmate was interviewed to monitor retaliation. One indicated that he continues to talk weekly or bi-weekly with the case manager about his allegation of sexual abuse. During the last 12 months, there were 21 inmates monitored for retaliation. Compliance with this standard was determined by reviewing established policy and supporting documentation and inmate and staff interviews.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	CLS.002.INT.01 Classification Intake Procedures
	MED.IMA.001 Health Appraisals at Reception
	IMM.002.003 Reasonable Accommodations
	ADM.019.003 Close Custody Units
	ADM.019.003.IHU Investigative Housing Unit.
	ADM.019.003.TAH Temporary Administrative Housing
	MED.002.001 Mental Health Services
	TCC may be utilized when a PREA allegation is received that requires victims be separated from perpetrators after all alternative means of separation have been assessed and no alternative means of separation are available (i.e. cell assignment/housing unit assignment change, intra-institutional transfer). Such assessment will occur within 24 hours of the allegation.
	ADM.019.TCC.01 also provides for Placement in Temporary Close Custody as a result of a PREA allegation based on a case by case basis taking into account factors that include but are not limited to: the nature and severity of the PREA prohibited act, medical, mental health, disciplinary and investigatory considerations, an inmate victim's access to property, services and privileges that are afforded to general population inmates, and any circumstances that would pose a threat to the safety, security and orderly running of the correctional facility.
	If it is determined that an inmate requires placement in Temporary Close Custody status as a result of a PREA allegation, the reasons for the placement shall be documented. During the last 12 months there have been no inmates placed in TCC based on an allegation of sexual abuse.
	Policy mandates that when placed in TCC or Self Protective status inmates are provided Food, Grooming, Showering and Shaving, Medical Services, Personal Items, Correctional Facility Clothing, Bedding and Linen, Inmate Legal Services, Correspondence, Visits and Telephone Calls, Recreation. Education, Visits by Professional and Correctional Facility Supervisory Staff, and Work Opportunities equal to general population within limits to protect inmate.
	Prior to placement in Segregation staff must complete a Department of Correction's Inmate placement investigation form.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

POLICY AND DOCUMENT REVIEWED:

IMM.001.004 Zero Tolerance Policy

Sexual-Assault-Victims-Bill-of-Rights

ADM.SID.035 Investigation Procedures

CUS.001.CSM.01 Crime Scene Mngt

SID IMP #014 Sexual Offenses

Attorney General Standards for Providing Services to Victims of Sexual Assault

PCS.001.008 PREA Compliance

ADM.006.SID.002 Arrest Procedure

ADM.006.011 Investigations by SID

Trained investigators (SID) who are full time employees of the facility conduct all investigations. The local county prosecutor's office investigators may also be involved in criminal investigations. A review of training records confirmed that the SID staff have received training on the investigation of sexual abuse and harassment in confinement settings. An investigator assigned to the facility and an investigator from the NJDOC central office were interviewed and confirmed compliance to this standard. Staff were aware that the Special Investigative Division (SID) staff conducted investigations relative to sexual abuse allegations. The agency follows a similar uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents". Victims of sexual assault are referred to health services for initial examination and treatment. New Jersey Department of Corrections Policy Statement ADM.006.011 Investigations by the Special Investigations Division mandate that NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by inmates, staff and other individuals who visit NJDOC facilities. The specialized training received by members of the SID helps to ensure that such investigations are conducted in a thorough, competent, objective manner and using the most current techniques and equipment possible. While remaining cognizant of the limitations and ramifications of the use of such investigatory techniques, any lawful techniques to perform an investigation may be used. There are multiple investigators in the NJDOC and one trained investigator at the institution. SID conducts the criminal investigations for the institution. There were forty four (44) allegation of sexual abuse or sexual harassment in the last 12 months. An investigation was initiated and completed in accordance with the PREA standards and agency policy for each allegations The documentation related to the investigations were contained in the SID files and was reviewed by the auditor. The facility utilizes an IPCM Information Tracking Log to ensure all required steps of the investigation are completed and are timely. The tracking log is maintained by the SID.

Department of Corrections Policy Number IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault mandates that the NJDOC Special Investigations Division (SID) accepts and investigates all allegations of inmate sexual abuse and harassment. Investigative staff receive specialized training in conducting sexual abuse investigations in a correctional setting. Division of Operations Internal Management Procedure CUS.001.CSM.01 Crime Scene Mngt and Special Investigations Division Internal Management Procedure #014 Procedures for Sexual Offenses outlines role and responsibility of SID staff in conducting sexual abuse investigations. Both polices provide requirements for SID to contact Local Prosecutor for criminal investigation and cooperate with the local prosecutor and other law enforcement staff for investigations. SID director interviewed and confirmed the agencies policy to conduct all investigations. include the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, and does so promptly, thoroughly, and objectively, the agency conduct such investigations for all allegations, including third party and anonymous reports, investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring, interviews investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator alleged victims, suspected perpetrators, and witnesses. The agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation. The agency does not require an inmate who alleges sexual abuse to submit to a polygraph examination or other truth assessment device as a condition for proceeding with the investigation of such an allegation. The SID serves as the facility liaison and provides requested information to outside agencies and provides access to the inmate.

The information contained in the log includes the date of the allegation, name of the victim/perpetrator, Segregation placement/reviews, initial two-day after-action review, full protocol, investigation outcome/date, date inmate notified of outcome and retaliation monitoring. Interviews with SID director and the local investigators, as well as an examination of supporting documentation, confirm the facility's compliance with this standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Policy
	Sexual-Assault-Victims-Bill-of-Rights
	ADM.SID.035 Investigation Procedures
	CUS.001.CSM.01 Crime Scene Mngt
	SID IMP #014 Sexual Offenses
	PCS.001.008 PREA Compliance
	ADM.006.SID.002 Arrest Procedure
	ADM.006.011 Investigations by SID
	ADM.006.000 SID MGO and Organizational Structure
	Trained investigators (SID) who are full time employees of the facility conduct all investigations. The local county prosecutor's office investigators may also be involved in criminal investigations. A review of training records confirmed that

the SID staff have received training on the investigation of sexual abuse and harassment in confinement settings. An investigator assigned to the facility and an investigator from the NJDOC central office were interviewed and confirmed compliance to this standard. Staff were aware that the Special Investigative Division (SID) staff conducted investigations relative to sexual abuse allegations. The agency follows a similar uniform evidence protocol as described in the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents". Victims of sexual assault are referred to health services for initial examination and treatment. New Jersey Department of Corrections Policy Statement ADM.006.011 Investigations by the Special Investigations Division mandate that NJDOC assigns to the SID the responsibility of investigating violations of the laws of the United States, the State of New Jersey, as well as violations of the New Jersey Administrative Code (10A), New Jersey Criminal Code Title 2C and NJDOC policies and procedures by inmates, staff and other individuals who visit NJDOC facilities. The specialized training received by members of the SID helps to ensure that such investigations are conducted in a thorough, competent, objective manner and using the most current techniques and equipment possible. While remaining cognizant of the limitations and ramifications of the use of such investigatory techniques, any lawful techniques to perform an investigation may be used. There are multiple investigators in the NJDOC and one trained investigator at the institution. SID sexual abuse training includes training that a preponderance of the evidence is utilized in determining whether allegations of sexual abuse/sexual harassment are substantiated. Investigator training programs provide in-depth clarification of this standard. When interviewed, the investigators were aware of the evidence standard. Compliance was determined by review of the investigation reviewed by the Auditor and interviews with four (4) SID investigators.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Policy
	Sexual-Assault-Victims-Bill-of-Rights
	ADM.SID.035 Investigation Procedures
	CUS.001.CSM.01 Crime Scene Mngt
	SID IMP #014 Sexual Offenses
	Attorney General Standards for Providing Services to Victims of Sexual Assault
	PCS.001.008 PREA Compliance
	GYCF Disposition - Out of Custody
	PCS.001.008 PREA Compliance requires that any inmate who alleges that he suffered sexual abuse at a DOC facility be informed, in writing, whether the allegation has been determined to be unsubstantiated, substantiated or unfounded at the conclusion of the investigation. When an allegation involves staff, the inmate would be informed if the staff member is no longer posted within their housing unit, is no longer employed at the facility, if the staff member was indicted on a charge related to sexual abuse within the facility or the Agency learned that the staff member was convicted on a charge related to sexual abuse. These findings would also be communicated to the inmate if the investigation was completed by an outside agency. When an inmate's allegation that he or she suffered sexual abuse in an agency facility, the agency will inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. When the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, the agency requests the relevant information from the investigative agency in order to inform the inmate. When an inmate's allegation that he or she has been sexually abused by another inmate, the agency subsequently informs the alleged victim whenever the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility. When the allegation involves staff, the inmate would be informed if the staff member is no longer posted within their housing unit, is no longer employed at the facility, if the staff member were indicted on a charge related to sexual abuse within their housing unit, is no longer employed at the facility, if the staff member were indicted on a charge related to sexual abuse within their housing unit, is no longer employed at the facility, if the staff member were indicted on a charge related to sexual abuse.
	Compliance with this standard was determined by a review of policy, staff interviews and inmates and copy of inmate's

notifications forms.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	IMM.001.004 Zero Tolerance Prison Sexual Assault.
	PCS.001.008 PREA Compliance
	New Jersey Department of Corrections Policy Statement IMM.001.004PS Zero Tolerance Policy: Prison Sexual Assault address the mandates of this standard. Employees are subject to disciplinary sanctions for violating agency sexual abuse/harassment policies. There have been no reported cases of inmates engaging in sexual activity with staff in the past 12 months and no staff members were disciplined or terminated for violation of agency policy.
	All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, may be reported to criminal investigators and to any law enforcement or relevant professional/certifying/licensing agencies, unless the activity was clearly not criminal. Compliance with this standard was determined by a review of policy/documentation and staff interviews. The IPCM stated there were no staff adverse actions due to sexual abuse, sexual harassment or sexual misconduct by staff.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	PCS.001.VOL.001 Volunteer Services
	New Jersey Department of Corrections Policy Statement IMM.001.004PS Zero Tolerance Policy: Prison Sexual Assault address the mandates of this standard. Employees are subject to disciplinary sanctions for violating agency sexual abuse/harassment policies. There have been no reported cases of inmates engaging in sexual activity with staff in the past 12 months and no staff members were disciplined or terminated for violation of agency policy.
	All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff that would have been terminated if not for their resignation, may be reported to criminal investigators and to any law enforcement or relevant professional/certifying/licensing agencies, unless the activity was clearly not criminal. Compliance with this standard was determined by a review of policy/documentation and staff interviews. The PCM stated there were no contractor or volunteers adverse actions due to sexual abuse, sexual harassment or sexual misconduct by staff.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	PCS.001.VOL.001 Volunteer Services
	Inmate Handbook on Discipline Updated 5 13 2021
	Title 10A Chap 4-12.3 Zero Tolerance disciplinary sanctions
	Title 10A Chap 4 Inmate Discipline
	ADM.008.000 Inmate Disciplinary Hearing Program MGO
	State of New Jersey Department of Corrections Policy Statement IMM.001.004 Zero Tolerance Policy: Prison Sexual Assault provides information on information on inmate disciplinary sanctions is provided as part of the orientation process upon entry into the facility. Inmates interviewed indicated a good understanding of their freedom to make allegations without consequences for making good faith allegations. The Inmate Discipline Program defines sexual assault of any person, involving non-consensual touching by force or threat of force, as the greatest severity level prohibited act. The program identifies inmates engaging in sexual acts and making sexual proposals or threats to another as a high severity level prohibited act. Consensual sex or sexual harassment of any nature is prohibited and will result in discipline. Consensual sex between inmates does not constitute sexual abuse, however NJDOC includes a disciplinary sanction for consensual sex. Sanctions are commensurate with the nature and circumstances of the abuse committed, along with the inmate's disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.
	NJDOC provides a handbook of disciplinary sanctions and disciplinary procedures that provides information to inmate subject to disciplinary sanctions will be sanctioned based on the formal disciplinary process that is defined within the policy. The disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the inmate's behavior when determining what type of sanction, if any, should be imposed. The NJSP considers the offer of therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse. The institution does not discipline inmates who make an allegation in good faith, even if an investigation does not establish evidence sufficient to substantiate the allegation. There were no disciplinary actions regarding PREA violations. Compliance with this standard was determined by a review of policy/documentation and the inmate discipline process, as well as staff and inmate interviews.

115.81 Medical and mental health screenings; history of sexual abuse Auditor Overall Determination: Meets Standard **Auditor Discussion** POLICY AND DOCUMENT REVIEWED: PCS.001.008 PREA Compliance IMM.001.004 Zero Tolerance Policy: PREA Housing Assignments **PREA Screening** MED.MHS.001.002 MHS Reception Evaluation MED.IMA.001 Health Appraisals at Reception New Jersey Department of Corrections MED.MHS.001.002 A new admission inmate will be seen by the medical staff within four hours of arrival. This encounter will be documented in the Electronic Medical Record (EMR). If an EMR terminal is not available at the site at the time of the assessment, the late entry workflow will be followed when the EMR entry is made. Interviews with medical and specialized staff confirm the institution has a very thorough system for collecting medical and mental health information and has the capacity to provide continued re-assessment and follow-up services. Inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Additionally, inmates who have previously perpetrated sexual abuse, as indicated during the screening, were offered a followup meeting with a mental health practitioner. Treatment services are offered without financial cost to the inmate. This was confirmed by observation and a review of intake screening documents. Screening for prior sexual victimization in any setting is conducted by unit team staff during in-processing procedures. In-processing procedures also screen for previous sexually assaultive behavior in an institutional setting or in the community. Since GSYCF has been missioned to be a diagnostic facility all new arrival receive a medical examination and mental health

Since GSYCF has been missioned to be a diagnostic facility all new arrival receive a medical examination and mental health evaluation. All inmate also undergo a PREA Screening instrument when they arrive. The facility continues to mandate follow-up screening within 14 days if the screening instrument provides information related to sexual victimization or abusiveness. This information is utilized for need for additional follow up to provide appropriate treatment or to determine the most appropriate facility within NJDOC to house the offender.

When indicated, staff members ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. Information related to sexual victimization or abusiveness is limited to medical and mental health practitioners and other staff with a need-to-know for treatment plans, security, housing, work, program assignments and management decisions. Signed and dated informed consents are obtained from inmates before reporting prior sexual victimization which did not occur in an institutional setting.

The institution does not house inmates under the age of 18. All screenings are recorded in the Electronic Medical Record (EMR). All information is handled confidentially and interviews with intake screening staff support a finding that the facility is in compliance with this standard. Compliance was confirmed by a review of policies and intake screening documents, as well as interviews with three inmates who self-identified as having experienced prior victimization during intake and Clinical Psychologists.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	CS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	CUS.001.CSM.01 Crime Scene Mngt
	ADM.SID.035 Investigation Procedures
	Sexual-Assault-Victims-Bill-of-Rights
	MED.MHS.002.001 - Emergency. Mental Health.
	MED.MLI.005 Forensic Specimens
	Level 3 IMP.524 Zero Tolerance Sexual Assault.
	MED.MHS.002.010 - Counseling Services-Sexual Assault
	MED.EME.005 Emergency Response
	MED.MLI.007 Sexual Assault
	Burlington Rape Crisis Center
	NJDOC Health Services Unit Internal Management Procedures MED.MLI.007 Sexual Assault mandates that the healthcare staff shall follow the institution's written plan for responding to allegations of sexual assault of inmates. The assaulted inmate will be transported to an Emergency Department properly equipped to assess (i.e. SANE Nurse), treat, and provide required prophylaxis, contraceptives, pregnancy termination counseling and gathering of forensic evidence. Healthcare staff shall not be involved in the management or treatment of sexual assault cases unless it is necessary to stabilize the inmate before the transfer to the appropriate community facility. Such care may include the control of bleeding or stabilizing of other injuries incurred, but most frequently would involve emotional support and understanding. The facility medical and mental health personnel provide emergency medical services to inmates. Medical personnel are on duty 24 hours a day, seven days a week and are available for consultation or call-back during off duty hours. Mental health providers are on-site five days per week and are also available for call-back during off duty hours. Health Services Unit Internal Management Procedures MED.IMHC.010 Inmates will be assessed a \$5.00 co-payment for each inmate visit for the following health-care related services. The following services are excluded from the co-payment requirement. Medical visits initiated by medical/mental health staff to comply with NJDOC policy or regulations and emergency services. Inmate victims of sexual abuse, while incarcerated, are offered information about and timely access to information on sexually transmitted infection prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. There were no allegations of sexual abuse that required referral for forensic examination in the last year. Compliance with this standard was determined by a review of policy/documentation and interviews with SANE medical staff and the Prison Medical

Auditor Overall Determination: Meets Standard Auditor Discussion POLICY AND DOCUMENT REVIEWED: PCS.001.008 PREA Compliance IMM.001.004 Zero Tolerance Policy: Sexual-Assault-Victims-Bill-of-Rights MED.MHS.002.001 - Emergency. Mental Health. MED.MLI.005 Forensic Specimens Level 3 IMP.524 Zero Tolerance Sexual Assault. MED.MHS.002.010 - Counseling Services-Sexual Assault MED.MLI.007 Sexual Assault PCS.001.TGI.01 Transgender and Intersex Inmates Burlington Rape Crisis Center

Mental Health Services Internal Management Procedures MED.MHS.002.010 Counseling Services for Victims of Sexual Assault provides the NJ Department of Corrections mandates that all incarcerated individuals under the control of the Department of Corrections will have access to Mental Health Services which shall include, but not be limited to, counseling by trained mental health services staff, for inmates who are victims of sexual assault, in addition to counseling offered by the emergency department of the hospital to which the inmate is referred. At the time of release from NJ DOC, aftercare services will be arranged for any active mental health disorder in accordance with current procedures for release planning. When mental health determines that follow up services are warranted relative to the sexual assault, separate from mental health needs, referrals will be made in accordance with recommendations reported by the SAFE/SANE counselor and/or other hospital emergency department staff. The facility will provide sexually abused victims with medical and mental health services consistent with the community level of care. Inmate victims of sexual abuse, while incarcerated, will be offered tests for sexually transmitted infections, as medically appropriate. All treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

The medical and mental health staff were aware that with the changes in housing to reflect the transgender's and intersex's feeling of appropriate housing to be safe be the main authority in housing. Both staff stated the facility recognizes that "115.83 (d) Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests and 115.83 (e) If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services" is possible. The staff at Virtual Memorial Medical Center provides services to male and female patients and the medical and mental health at the GSYCF are aware of the stipulations and would provide this information to the Medical Center and Burlington Rape Center.

The facility will attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners. Health services include medical and mental health aftercare plans to be developed no later than 30 days prior to the anticipated date of release for inmates subjected to sexual abuse. Compliance to the standard was verified through review of policy and interviews with medical staff and mental health staff.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	115.86 SAAC Review Email GYCF
	PCS.001.PREA.001 Sexual Assault-PREA Advisory Committee
	New Jersey Department of Corrections PCS.001.PREA.001 Sexual Assault-PREA Advisory Committee mandates that the IPCM convene an institutional level sexual assault review of the sexual assault allegation within 30 days of the completion of the investigation by the Special Investigations Division (SID). The policy requires the following:
	(a) Within 30 days of the conclusion of the investigation, unless the allegation was determined to be unfounded, a review team, designated by the Chief Administrative Officer, shall review the case and:
	(b) Determine what may have been the motivation for the incident or allegation such as, but not be limited to, race, ethnicity, gender, gender identity, sexual orientation, transgenderism, intersex identification, gang affiliation, etc.
	(c) Determine if there is a need for changes to policy or procedure; or if factors such as physical barriers or staffing may have enabled the abuse.
	(d) Assess whether monitoring technology should be deployed to supplement staff supervision.
	(e) The review team shall prepare and submit to the Chief Administrative Officer and facility PREA Compliance Manager a written report of their findings and any recommendations for improvement.
	(f) Documentation for any recommendation not implemented shall be maintained.
	When staff enters an Allegation of Sexual Abuse or Sexual harassment into the NJDOC Data Base the Data Base produces documents that must be completed in order to finalize the investigation. Part of the documents that are required include a description of the incident, a retaliation monitoring flow sheet, a notification memo to the offender(s) and an Incident Review Team document. The facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded.
	There were eight incidents that required a review team to conduct an incident review at the end of the investigation prior to the PAQ being published. There were additional Incident Review Team meeting conducted during the audit 12 months. The facility completed the required review within 30 days of the conclusion of the investigation. A review of the Incident Review team documentations of alleged sexual abuse, policy and interviews with the Warden and PREA compliance manager. A review of the NJDOC data base reports and incident review report, and interviews with Incident Review Team Members

confirmed compliance with this standard.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	New Jersey Department of Corrections PCS.001.PREA.001 Sexual Assault/Prison Rape Elimination Act (PREA) Advisory Council is utilized to review and analyze at the departmental level all allegations and incidents of sexual assault/harassment in accordance with the Prison Rape Elimination Act (PREA) to ensure that all applicable policies and procedures have been followed to review and analyze at the departmental level all allegations and incidents of sexual assault/harassment in accordance with the Prison Rape Elimination Act (PREA) to ensure that all applicable policies and procedures have been followed. As confirmed by a review of documents, the institution collects accurate, uniform data for every allegation of sexual abuse/sexual harassment by using a standardized instrument. The agency tracks information concerning sexual abuse utilizing data, inmate data and PREA data. The data collected includes the information necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by the DOJ. The PREA Coordinate requires and monitors private faclity and programs for includion in the quarterly and annual report. The agency aggregates and reviews all data annually. Compliance was determined by review of the Agency Website and interviews with PREA coordinator and PREA compliance manager

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	IMM.001.004 Zero Tolerance Policy:
	2019_PREA_AnnualReport
	New Jersey Department of Corrections PCS.001.PREA.001 Sexual Assault/Prison Rape Elimination Act (PREA) Advisory Council was developed to review and analyze at the departmental level all allegations and incidents of sexual assault/harassment in accordance with the Prison Rape Elimination Act (PREA) to ensure that all applicable policies and procedures have been followed. An Annual Report is prepared and placed on the NJDOC website https://www.nj.gov/corrections/. The 2019 Annual Report was reviewed by the auditor. There were no corrective action plan required at GSYCF during the 2019 review. The GSYCF was scheduled to be audited in 2020,however was postponed due to the pandemic. Compliance with this standard was determined by a review of policy/documentation and staff interviews.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	POLICY AND DOCUMENT REVIEWED:
	PCS.001.008 PREA Compliance
	2019_PREA_AnnualReport
	https://www.nj.gov/corrections/.
	The PREA Coordinator will ensure confidential information collected is securely retained. Only aggregated data will be placed in the annual PREA report. The data will be reviewed by the Agency Head, or designees before it is placed on website and internal departmental stakeholders.
	1. The approved report will include all aggregated data from facilities under direct control of the DOC and private facilities with which the department contracts. The report will be made readily available to the public at least annually through the DOC website.
	2. Before making aggregated sexual abuse data publicly available, the DOC will remove all personal identifiers in accordance with state law.
	3. The DOC will maintain sexual incident data collected for at least ten (10) years after the date of the initial collection.
	Compliance with this standard was determined by a review of policy/documentation and interviews with PREA coordinator, Agency Health, PCM and Warden.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Garden State Youth Correctional Facility was audited in October 2016. The sceduled audit for 2019 and 2020 were postponed due to the pandemic. The facility posted information on the upcoming PREA audit on June 16, 2021. There were no correspondences from inmates or staff. Inmate were randomly selected and interviewed in private offices. All documentation requested during the on site and post audit period. The PREA Compliance Manager and the PRE Coordinator and her support team were available to provide information and to discuss questions or concerns that were noted during the tour and review of documents.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	NJDOC website https://www.nj.gov/corrections/ https://www.nj.gov/corrections/ contains information on past PREA audits. The public has access to reporting mechanisms and NJDOC PREA trends via the NJDOC website. The NJDOC currently meet all applicable PREA standards and no corrective actions are required.

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

Supervision and monitoring	
Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
Supervision and monitoring	
In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
Supervision and monitoring	
In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect immates against sexual abuse? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including 'blind-spots' or areas where staff or inmates may be isolated)? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? In calculating adequate staffing levels and determining the need for video monito

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	(g) Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

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

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

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	<u> </u>
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d) (8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
		yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (I)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates		
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes	
115.78 (g)	Disciplinary sanctions for inmates		
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes	
115.81 (a)	Medical and mental health screenings; history of sexual abuse		
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes	
115.81 (b)	Medical and mental health screenings; history of sexual abuse		
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes	
115.81 (c)	Medical and mental health screenings; history of sexual abuse		
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes	
115.81 (d)	Medical and mental health screenings; history of sexual abuse		
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes	
115.81 (e)	Medical and mental health screenings; history of sexual abuse		
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes	
115.82 (a)	Access to emergency medical and mental health services		
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes	
115.82 (b)	Access to emergency medical and mental health services		
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes	
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes	

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews		
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes	
115.86 (c)	Sexual abuse incident reviews		
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes	
115.86 (d)	Sexual abuse incident reviews		
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes	
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes	
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes	
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes	
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes	
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes	
115.86 (e)	Sexual abuse incident reviews		
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes	
115.87 (a)	Data collection		
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes	
115.87 (b)	Data collection		
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes	
115.87 (c)	Data collection		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes	
115.87 (d)	Data collection		
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes	
115.87 (e)	Data collection		
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes	
115.87 (f)	Data collection		
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes	

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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)	(i) Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes