PREA Facility Audit Report: Final

Name of Facility: Plymouth County Jail
Facility Type: Prison / Jail
Date Interim Report Submitted: 03/07/2025
Date Final Report Submitted: 04/14/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Chris Sweney	**Date of Signature:** 04/14/2025

AUDITOR INFORMATION	
Auditor name:	Sweney, Chris
Email:	csweney.prea@gmail.com
Start Date of On-Site Audit:	01/27/2025
End Date of On-Site Audit:	01/27/2025

FACILITY INFORMATION	
Facility name:	Plymouth County Jail
Facility physical address:	451 14th Avenue Northeast, Le Mars, Iowa - 51031
Facility mailing address:	

Primary Contact

Name:	Dawn Fifita
Email Address:	dfifita@co.plymouth.ia.us
Telephone Number:	7125464419

Warden/Jail Administrator/Sheriff/Director	
Name:	Tami Jorgensen
Email Address:	tjorgensen@plymouthcountyiowa.gov
Telephone Number:	(712)546-4419

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

Facility Health Service Administrator On-site	
Name:	Dr. Miller
Email Address:	Destiny.MillerMancuso@floydvalley.org
Telephone Number:	(712)546-4419

Facility Characteristics	
Designed facility capacity:	70
Current population of facility:	37
Average daily population for the past 12 months:	35
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both womens/girls and mens/boys

In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of "intersex" and "transgender," please see https://www.prearesourcecenter.org/standard/115-5)	
Age range of population:	18+
Facility security levels/inmate custody levels:	3
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	15
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:	2

AGENCY INFORMATION	
Name of agency:	Plymouth County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	451 14th Avenue Northeast, Le Mars, Iowa - 51031
Mailing Address:	
Telephone number:	

Agency Chief Executive Officer Information:

Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Jill Holzman	**Email Address:**	jholzman@co.plymouth.ia.us

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:	
0	

Number of standards met:
45

Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-01-27
2. End date of the onsite portion of the audit:	2025-01-27

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	CASSA - Office: (515) 244-7424, Hotline: (800) 770-1650 https://www.iowacasa.org/

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	70
15. Average daily population for the past 12 months:	35
16. Number of inmate/resident/detainee housing units:	5
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	(●) Yes ( ) No ( ) Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
18. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	37
19. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
20. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
21. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
22. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
23. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
24. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2

25. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
27. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
28. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0
29. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
30. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
31. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	18

32. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	5
33. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	2
34. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

35. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	9
36. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☑ Housing assignment ☑ Gender ☐ Other ☐ None

37. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The auditor conducted interviews with random and targeted inmates. The in-house inmate population on the first day of the onsite review was 37. All reasonable efforts were made to conduct the required number of targeted inmate interviews. The auditor selected additional inmates from the available targeted populations and increased the number of random inmate interviews to ensure that the appropriate numbers of inmates were interviewed. There was a total of 9 formal inmate interviews conducted. The auditor selected inmates randomly by using a full roster provided at the beginning of the on-site review. Interviews were conducted with at least one inmate for each living area of the facility.
38. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	(●) Yes ( ) No
39. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
40. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	1

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

41. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0
41. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees. ☐ The inmates/detainees in this targeted category declined to be interviewed.
41. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/detainees).	The facility reported no youthful Inmates. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
42. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0

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

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

46. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	1
47. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
47. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
47. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no Inmates who identify as lesbian, gay, or bisexual. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
48. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
48. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

48. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no Inmates who identify as transgender or intersex. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
49. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
49. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
49. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported there were no Inmates currently in the facility who reported sexual abuse during the audit period. This was verified during the tour of the facility and confirmed during staff interviews.
50. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
50. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

50. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no Inmates who disclosed prior sexual victimization during their risk screening. This was verified while reviewing intake documentation and confirmed by facility staff during their interviews.
51. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
51. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
51. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility reported no Inmates who were placed in segregated housing/isolation for risk of sexual victimization. This was verified during the tour of the facility and confirmed during staff and inmate interviews.
52. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
53. Enter the total number of RANDOM STAFF who were interviewed:	8

54. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
55. Were you able to conduct the minimum number of RANDOM STAFF interviews?	○ Yes ◉ No
55. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)	☐ Too many staff declined to participate in interviews. ☐ Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles). ☑ Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews. ☐ Other
56. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
57. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	8
58. Were you able to interview the Agency Head?	(●) Yes ( ) No
59. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
60. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
61. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

	☐ Other
63. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	○ Yes ◉ No
64. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	○ Yes ◉ No
65. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

66. Did you have access to all areas of the facility?	◉ Yes ○ No
Was the site review an active, inquiring process that included the following:	
67. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	◉ Yes ○ No

68. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	(●) Yes ( ) No
69. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
70. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No
71. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

Documentation Sampling

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

72. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No
73. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	1	0	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	1	0	1	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

80. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	0
80. Explain why you were unable to review any sexual abuse investigation files:	Plymouth County reported zero sexual abuse investigations during the audit period. This was verified during staff and inmate interviews.

81. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	○ Yes ○ No ◉ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
82. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
83. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
84. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
85. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
86. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

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

Staff-on-inmate sexual harassment investigation files	
93. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
94. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
95. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ○ No ◉ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
96. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

97. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

Non-certified Support Staff	
98. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

AUDITING ARRANGEMENTS AND COMPENSATION	
99. Who paid you to conduct this audit?	◉ The audited facility or its parent agency ○ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ○ A third-party auditing entity (e.g., accreditation body, consulting firm) ○ Other

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ III - 34 Jail PREA Policy 2. PCJ Organizational Chart Interviews: 1. Jail Administrator/PREA Coordinator Interview The PREA Coordinator indicated she has enough time to manage all of their PREA related responsibilities. The PREA Coordinator stated she meets regularly with the Sheriff and has sufficient authority to implement changes as needed. The PREA Coordinator handles day to day PREA related issued and consults regularly with the Sheriff.

	Site Review Observations: 1. Observations during on-site review of physical plant (a) Plymouth County Jail (PCJ) has a written policy mandating zero tolerance relating to sexual assault and sexual harassment. *“The Plymouth County Sheriff’s Office has a zero-tolerance policy toward all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct in the Prison Rape Elimination Act policies.”* (a) As indicated on their Organizational Chart and in policy, the PCJ has a designated PREA Coordinator who reports directly to the Sheriff. During the PREA Coordinator interview, he stated that as the PREA Coordinator he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. (b) The PCJ only operates one facility therefore, they only have a designated PREA Coordinator. The Auditor conducted a thorough review of the agency’s policies and procedures, Organizational Chart, and interviewed staff and inmates. The Auditor determined the agency has developed an appropriate zero tolerance policy which includes prevention, detection and response techniques to all allegations of sexual abuse and sexual harassment. An appropriate staff member has been designated to develop, implement, and oversee the agency’s and facility’s PREA efforts. The Plymouth County Jail has successfully created a zero-tolerance culture towards all forms of sexual abuse and sexual harassment. The Auditor determined the facility's Zero-Tolerance culture has resonates with staff and inmates. The Plymouth County Jail maintains one facility and has appointed a PREA Coordinator. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.12	**Contracting with other entities for the confinement of inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. Pre-Audit Questionnaire Interviews:

1. Jail Administrator/PREA Coordinator Interview

During interviews with the Jail Administrator/PREA Coordinator he indicated that they do not contract with other agencies to house their inmates.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) Auditor was provided documentation and confirmed during interviews that the PCJ does not contract with any other county or entity including other government agencies for housing.

The Auditor reviewed the agency's PREA policy and interviewed staff. The agency has an appropriate policy to ensure new contracts and revisions of contracts for the confinement of PCJ inmates include provisions to comply with this standard. The Auditor determined the Plymouth County Jail meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.13	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ Policy III – 6c Supervision and Monitoring 3. PCJ Policy III – 6A CCTV Operations 4. Staffing Plan Documents 5. Supervisor Round Reports Interviews 1. Jail Administrator/PREA Coordinator Interview 2. Intermediate Supervisor Interviews 3. Random Inmate Interviews. Interviews with the Jail Administrator/PREA Coordinator confirmed that the Plymouth County Jail has developed a staffing plan and has adopted generally accepted detention and correctional practices and that any drop below minimum staffing is reported to facility leadership.

	Interviews with supervisors confirmed that unannounced rounds are done on all shifts at varied times. Both indicated that rounds are documented in the “Activity Log Report” round are indicated on the report. Random inmate interviews confirmed that they regularly see supervisors in the housing units and other areas in the facility. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ staffs its facility based on generally accepted detention and correctional practices. However, the PCJ did not provide documentation of an annual assessment which includes all requirements of the PREA standard. Iowa State statute mandates that female staff is on duty at all times. Since their last PREA audit, the average daily number of inmates was 40. Since their last PREA audit, the average daily number of inmates on which the staffing plan was predicated was 40. (b) The PCJ does not deviate from the staffing plan. This was discussed and confirmed during the interview with the Jail Administrator/PREA Coordinator. (c) The PCJ reported there were no deviations from their staffing plan in the last 12 months. (d) PCJ policy states that “Intermediate-level or higher-level supervisors will conduct and document periodic unannounced rounds through the jail to identify and deter staff sexual abuse and sexual harassment.” (e) PCJ policy states that. “Staff is prohibited from alerting other staff members when the jail shift supervisor or designee is conducting these unannounced rounds.” The PCJ provided copies of their supervisor’s “Activity Log Report” which shows this as a regular practice. **Corrective Action:** **(d) The PCJ staffs its facility based on generally accepted detention and correctional practices. However, the PCJ did not provide documentation of an annual assessment which includes all requirements of the PREA standard.** **Please provide a staffing plan which includes (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-**

	spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. **Update:** **As of March 12th, 2025 Plymouth County has submitted a staffing plan which includes (1) Generally accepted detention and correctional practices; (2) Any judicial findings of inadequacy; (3) Any findings of inadequacy from Federal investigative agencies; (4) Any findings of inadequacy from internal or external oversight bodies; (5) All components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated); (6) The composition of the inmate population; (7) The number and placement of supervisory staff; (8) Institution programs occurring on a particular shift; (9) Any applicable State or local laws, regulations, or standards; (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and (11) Any other relevant factors. The staffing plan was reviewed and signed by both the PREA Coordinator and Sheriff.** The Auditor concluded the facility has an adequate staffing plan to ensure the protection of inmates from sexual abuse. The Auditor reviewed policies, procedures, the Staffing Plan, Staffing Plan Review, facility logbooks, shift rosters, made observations, and conducted interviews with staff and inmates. The facility conducts an annual staffing plan review as required by this standard. The Auditor determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.14	**Youthful inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy 11 – 01B Juveniles Interviews: 1. Jail Administrator/PREA Coordinator Interview

During the interview with the Jail Administrator/PREA Coordinator she indicated that they do not generally house Juveniles but If necessary, Juvenile Inmates would be housed separate from adult inmates and sufficient space is available to keep Juvenile inmates separate in all areas of the facility.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) PCJ policy states:

- *"Juveniles shall not be booked into the Plymouth County Jail during the admission of an adult inmate. In the event that a juvenile and adult are arrested, the juvenile shall be held or booked in a separate room until the adult inmate is secured in a holding cell.*
- *No adult or opposite gender inmates will be held in the same area of the jail where a juvenile is being held.*
- *All juveniles held shall not be exposed to adult inmates during any activities or daily jail routines.*
- *Juveniles being held within the jail shall be afforded the same privileges as adult inmates as provided by Iowa Law.*
- *No juvenile will participate in any work details except the routine upkeep of their cells.*
- *All juveniles shall be supervised on a continual basis by a Jail Officer."*

In the past 12 months, the number of housing units to which youthful inmates were assigned that provide sight and sound separation between youthful and adult offenders in dayrooms, common areas, showers, and sleeping quarters was zero (0).

In the past 12 months, the number of youthful inmates placed in SAME HOUSING UNIT as adults at this facility was zero (0).

(b) The PCJ, as much as possible, maintains sight and sound separation in areas outside of housing units. The PCJ provides direct staff supervision when youthful and adult inmates may be in the same area.

(c) The PCJ avoids placing youthful inmates in isolation as a general practice. Youthful inmates are provided daily exercise and legally required special education services and have access to other programs when available.

In the past 12 months, the number of youthful inmates who have been placed in isolation in order to separate them from adult inmates was zero (0).

During the onsite visit there were no youthful inmates confined at the PCJ.

The Auditor reviewed PCJ policies, procedures, population reports, interviewed staff and inmates, and made observations to determine the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with

	this standard.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Plymouth County Corrections (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ Policy III - 34 PREA Plymouth County Jail LGBTI 3. PCJ Policy III – 6A CCTV Operations 4. Voluntary Gender Identity Statement 5. Risk Screening Form Interviews: 1. Jail Administrator/PREA Coordinator Interview 2. Random Staff Interviews 3. Random Inmate Interviews The PREA Coordinator indicated during his interview that he meets with transgender inmates to determine their preference of staff to be searched by. Random staff interviews reiterated that they have not conducted cross-gender strip searches or cross gender visual body cavity searches. Staff interviews confirmed that they announce themselves or will announce staff of a different gender prior to entering the housing unit Random inmate interviews confirmed they have not been strip searched or visual body cavity searched by a staff member of the opposite sex. Inmate interviews indicated that announcements by staff are being made when staff enter housing areas. Interviews with random female inmates stated that “pat down searches are always conducted by female staff and they have access to regularly available programming which includes out of cell opportunities”. Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy states staff will not conduct cross-gender strip searches or cross gender visual body cavity searches except in exigent circumstances or when performed by

	medical practitioners. Per policy, all strip searches are documented. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates was one (1). (b) Private areas were seen in Booking to conduct strip searches. During the on-site there was a number of female staff available to conduct searches of female inmates. At least one female staff member is assigned to the facility at all times. Pat-searches were observed during the onsite visit. Searches were conducted by appropriate staff, no issues were identified. The number of pat-down searches of female inmates that were conducted by male staff was one (1). The number of pat-down searches of female inmates conducted by male staff that did not involve exigent circumstances was zero (0). (c) The facility documents all strip searches however PCJ policy states staff will not conduct cross-gender strip searches or cross gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. (d) PCJ policy states the facility implements policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Shower and toilet areas were observed in housing units and in booking. All had appropriate privacy screens and partitions. Camera views from control centers did not present any issues. PCJ Policy requires staff to announce their presence when entering housing units with inmates of a different gender. Additionally, postings were seen throughout the facility to make inmates aware that both male and female staff may enter their housing area. (e) PCJ policy states that inmates will not be searched or physically examined for the sole purpose of determining the genital status. If the inmate's genital status is unknown, the PCJ will initiate conversation with the inmate in a professional manner in a private setting in order to preserve confidentiality (f) PCJ policy states that unless an emergency or other special situation exists, pat searches should be conducted by staff of the same gender as the inmate. All staff is trained how to conduct searches of transgender and intersex inmates in a professional manner and in the least intrusive manner possible that is consistent with security needs. The Auditor concluded staff had been appropriately trained to conduct cross-gender searches and make opposite gender announcements when entering inmate housing units. Inmates can shower, change clothing, and use the restroom without nonmedical staff of the opposite gender seeing them do so. Staff has been trained to treat transgender and intersex inmates professionally and respectfully. The Auditor reviewed the agency's policies and procedures, training documents, shift rosters,

	made observations, and interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.16	**Inmates with disabilities and inmates who are limited English proficient**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ – PCJ Policy III - 34 PREA 2. PCJ Inmate Handbook (English/Spanish) 3. Language Line Interviews: 1. Random Staff Interviews 2. Random Inmate Interviews During interviews with random staff, they stated each inmate is provided PREA information upon arrival. Staff were asked how the facility ensures inmates who are disabled or do not speak English benefit from the agency's information and education. Staff stated they have access to a language hotline for translation services. Random staff were asked about the use inmate interpreters. Each stated they do not use inmates to interpret information to inmates. Staff informed the auditor they have select staff who are bilingual and have access to an interpretation service by phone. During random inmate interviews inmates were asked if they were aware of any inmates that they felt could not report something for themselves due to mental health issues, disabilities (Deaf or Blind) or could not speak English. All stated they were unaware of any inmates like that. Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ Policy states: "*Inmates with disabilities and inmate who are limited English proficient*

A. The agency shall take appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall 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, limited reading skills, or who are blind or have low vision. An agency is not required to take actions that it can demonstrate would result in a fundamental alteration in the nature of a service, program, or activity, or in undue financial and administrative burdens, as those terms are used in regulations promulgated under title II of the Americans With Disabilities Act, 28 CPR 35.164.

B. The agency shall 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary.

C. The agency shall not rely on inmate interpreters, inmate readers, or other types of inmate assistants 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.

The Auditor reviewed the PCJ Intake Information. The information is provided to each inmate during the booking process. Inmate information is maintained in English and Spanish. The Auditor observed the agency's PREA posters in all facility areas. Agency posters include English and Spanish. In the event the facility receives an inmate who is blind or has low vision the facility ensures a staff member reads the PREA information to the inmate. Staff take appropriate steps to ensure an inmate with intellectual disabilities understands the agency's PREA information through a one on one session with the inmate."

Inmates who cannot read English or Spanish can benefit from the facility's PREA information through use of Language Line Services, Inc. The facility maintains a Language Line telephone in the intake area. The PCJ employs bilingual staff who can interpret for non-English speaking inmates. The PREA video is available in both English and Spanish. Each inmate is required to sign the acknowledgement form after receiving facility information and education.

(b) The PCJ takes 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.

	(c) The PCJ refrains 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. Staff were interviewed and reaffirmed they would use Language Line Services, Inc. or another staff member to interpret with a limited English-speaking inmate. In the past 12 months, the number of instances where inmate interpreters, readers, or other types of inmate assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations was zero (0). Facility staff provided the auditor a tour of the facility. The auditor observed PREA posters and other material posted in housing units and various other common areas. All posted materials were maintained in English and Spanish. Additionally, inmate tablets and tablets are also available in English and Spanish. The auditor concluded the agency provides information that ensures equal opportunities to inmates who are disabled. The agency takes reasonable steps to provide inmates who are limited English proficient meaningful access to all aspects of the agency's prevention, detection and response policies towards sexual abuse and sexual harassment. The auditor conducted a review of PCJ policies, procedures, training form, interviewed staff and inmates and determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.17	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ Policy I – 1A Contractor Requirements PCJ Staff and Contractor Background Checks Interviews: 1. Jail Administrator/PREA Coordinator Interview During her interview, the Jail Administrator/PREA Coordinator indicated that

	background checks are completed on all new staff however, new hires are not asked directly about prior allegations of sexual abuse. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ conducts background investigations for new hires as well as for staff being considered for a promotion. (b) PCJ policy indicates that incidents of sexual abuse or harassment are considered when evaluating candidates for promotion. (c) PCJ policy states that before hiring new employees, who may have contact with inmates, the agency: consistent with Federal, State, and local law, make its best efforts to contact any prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. PCJ reported that in the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background record checks was 5. (d) PCJ policy requires a criminal background records check before enlisting the services of any contractor who may have contact with inmates. PCJ reported that in the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with inmates was 9. (e) PCJ Policy III - 34 PREA requires criminal background records checks every five years of current employees and contractors who may have contact with inmates. (f) The PCJ has a process which asks all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section during the hiring or promotion process. PCJ policy imposes upon employees a continuing affirmative duty to disclose any such misconduct. (g) PCJ policy states material omissions regarding such misconduct, or the provision of materially false information, grounds for termination The PCJ provides 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. The auditor concluded the PCJ is taking appropriate steps to identify previous acts of sexual misconduct prior to hiring staff, enlisting the services of contractors, and before promoting staff members. The auditor conducted a thorough review of the agency's policies, procedures, employment records, forms, interviewed staff and determined the agency meets the requirements of this standard. Based upon the

	review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Facility Diagrams 2. Facility Tour Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a,b) The PCJ considers the effect of any new design, acquisition, expansion, or modification on the agency's ability to protect inmates from sexual abuse. Protection of inmates from sexual abuse through the installation of electronic surveillance and other technology is continuously evaluated. The Jail Administrator/PREA Coordinator was aware of the PREA standard requiring her participation in considering the affects when designing new or updating existing facilities. The auditor has established the PREA Coordinator considers design affects and camera placements to protect inmates from sexual abuse. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ - PREA Policy
2. Centers Against Abuse and Sexual Assault (CASSA)

Interviews:

1. Jail Administrator/PREA Coordinator Interview
2. PCSO Investigator Interview
3. Random Staff Interviews

Interviews conducted with the Jail Administrator/PREA Coordinator and random staff reiterated that as requested by the victim, victim advocate, agency staff member, or community-based organization the victim will receive support through the forensic medical examination process and investigatory interviews. The victim advocate may also provide on-going emotional support, crisis intervention, and referrals for other services

Random staff interviews show staff are trained and understand their responsibilities to preserve, collect and properly handle evidence.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The Jail Administrator/PREA Coordinator is responsible for administrative investigations and follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence. All criminal investigations are referred to the Plymouth County Sheriff's Office (PCSO) for investigation.

(b) PCJ protocol is appropriate for youth; however, the PCJ does not generally house youthful offenders.

(c) The PCJ offers all victims of sexual abuse access to forensic medical examinations, whether at an outside facility, without financial cost, where evidentiary or medically appropriate. Interviews with the PREA Coordinator reiterated that all victims of sexual abuse are offered forensic examinations. Forensic medical examinations are completed at Floyd Valley Healthcare by qualified Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

The number of forensic medical exams conducted during the past 12 months was zero (0).

The number of exams performed by SANEs/SAFEs during the past 12 months was zero (0).

The number of exams performed by a qualified medical practitioner during the past 12 months was zero (0).

(d) The PCJ uses the Centers Against Abuse and Sexual Assault (CASSA) to provide

	victims with advocacy services. (e) The PCJ is responsible for administrative investigations and refers all criminal matters to the Plymouth County Sheriff's Office. (f) The auditor is not required to audit this provision The Auditor determined an appropriate uniform evidence protocol is used when collecting evidence following a sexual abuse incident. The PCJ forwards sexual abuse investigations to the PCSO that may include criminal charges. The facility ensures access to a Sexual Assault Nurse Exam, conducted by trained medical staff at Floyd Valley Healthcare. The Auditor reviewed the agency's policies, procedures, investigative files and conducted interviews with investigators, victim advocates and medical personnel. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard

115.22	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: PCJ - PREA Policy PCJ – Website https://plymouthcountysheriff.com/wp-content/uploads/2022/05/PRIS-ON-RAPE-ELIMINATION-ACT.pdf) Interviews: 1. Jail Administrator/PREA Coordinator 2. PCSO Investigator Interview During interviews with the Jail Administrator/PREA Coordinator and PCSO Investigator they indicated that they receive and investigate all allegations of sexual misconduct and refer criminal allegations to the PCSO. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ ensures an administrative and criminal investigation are completed for all

	allegations of sexual abuse The PREA Coordinator will receive all allegations and will refer criminal investigations to the PCSO to investigate. The PREA Coordinator is responsible for administrative investigations. Interviews conducted with the PREA Coordinator confirmed all administrative and criminal investigation is completed properly. In the past 12 months, the number of allegations of sexual abuse and sexual harassment that were received was one (1). In the past 12 months, the number of allegations resulting in an administrative investigation was one (1). In the past 12 months, the number of allegations referred for criminal investigation was zero (0). (b) The PCJ has a policy and practice in place that ensures that allegations of sexual abuse or sexual harassment are referred for investigation. The PREA Coordinator will receive the allegations and conduct administrative investigations. Allegations that involve criminal behavior are referred to the PCSO for investigation. The PREA Coordinator will assist the PCSO with the investigation as required. The PCJ Policy III - 34 PREA including who is responsible for investigations is posted on their website. The PCJ documents all referrals to the PCSO. The PREA Coordinator is responsible for completing the Investigation Log which includes a chronological order of events in the investigation. (d,e) Auditor is not required to audit these provisions The Auditor concluded the PCJ appropriately refers criminal allegations of sexual abuse and sexual harassment to the PCSO. The Auditor observed evidence the facility investigates all allegations of sexual abuse and sexual harassment. After reviewing agency policies, procedures, the PCJ website, investigative files and interviewing staff and inmates, the Auditor determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard

115.31	**Employee training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III – 34 PREA
2. PCJ Policy III – 7 Staff Training
3. PREA PowerPoint (Who to Report To)

Interviews:

1. Jail Administrator/PREA Coordinator Interview
2. PREA Compliance Manager Interview
3. Random Staff Interviews

During the Jail Administrator/PREA Coordinator and PREA Compliance Manager's interviews they explained that PREA training is provided before new staff, contract staff or volunteers can have contact with inmates and again every other year. Additionally, they explained that staff receive training to deal with both male and female inmates and sign for the information they receive.

Random staff were asked questions related to training topics listed in the agency's lesson plan. Staff appeared knowledgeable of all topics. Staff understood their responsibilities, understood the dynamics of sexual abuse and articulated common reactions of sexual abuse victims. Staff had been trained to avoid inappropriate relationships with inmates. Staff understood the agency's reporting requirements and how to comply with relevant laws. Additionally, security staff member understood their responsibilities as first responders.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The PCJ provides all staff with training which includes:

- The PCJ Zero-Tolerance policies concerning sexual misconduct
- How to fulfill their 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
- The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
- The dynamics of sexual abuse and sexual harassment in confinement
- The common reactions of 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

	(b) PCJ staff receives training tailored to both male and female inmates, the facility houses male and female inmates and training records reviewed demonstrated a distinction in the training. All staff receives this training regardless of whether or not they are reassigned from another facility. (c) All current employees who have contact with inmates have received training. A review of the staff training records and random staff interviews confirm training was received. Staff sign that they have received and understand the information provided. (d) The PCJ has completion reports which verify they have received the training and understand the training they have received. Upon completion of the lesson plan, staff is required to complete a test over the material. The Auditor concluded the PCJ has appropriately trained staff and documented the employees' understanding of the training received. All facility staff interviewed were knowledgeable and retained the information provided through agency training efforts. The Auditor reviewed agency policies, procedures, lesson plans, training records, acknowledgement forms, and interviewed staff, and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.32	**Volunteer and contractor training**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III – 34 PREA 2. PCJ Policy III – 7 Staff Training 3. Vendor Sign Off 4. Acknowledgement of Receipt Plymouth County Jail Sexual Misconduct with Offenders Policy Interviews: 1. Jail Administrator/PREA Coordinator 2. PREA Compliance Manager During the Jail Administrator/PREA Coordinator and Sergeant/PREA Compliance Manager’s interviews they explained that PREA training is provided before new staff, contact staff or volunteers can have contact with inmates and again every two years.

	Additionally, they explained that staff receive training to deal with both male and female inmates and sign for the information they receive. Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy requires “All PCJ employees, contracted personnel, and volunteers who may have contact with inmates will receive instruction related to: • The PCJ Zero-Tolerance policies concerning sexual misconduct • How to fulfill their 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 • The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment • The dynamics of sexual abuse and sexual harassment in confinement • The common reactions of 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 (a) All volunteers and contractors who have contact with inmates have been notified of the agency’s zero-tolerance policy regarding sexual abuse and harassment. Volunteers and contractors are informed how to report such incidents. The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates and their training is tailored during orientation. The number of volunteers and contractors, who may have contact with inmates, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response was 7 (b) PCJ volunteers and contract staff receives training tailored to the gender of the inmates, the facility houses male and female inmates and training records reviewed demonstrated a distinction in the training. (c) The PCJ maintains documentation confirming that volunteers and contractors understand the training they have received. Upon receipt of the PREA information, volunteers and contractors are required sign and acknowledge they understand the material. A review of the volunteer and contract staff training records confirm training was received.

	The Auditor concluded the agency provides appropriate training to volunteers and contract staff. The agency's training curriculum is appropriate to ensure compliance with this standard. The agency maintains documentation that volunteers and contractors have received training. The Auditor reviewed the agency's policies, training curriculum, training records, and interviewed contractors and volunteers and determined the agency meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.33	**Inmate education**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PREA Brochure Acknowledgement 3. Who To Report To Brochure 4. Inmate Handbook 5. PREA Video Interviews: 1. PREA Coordinator Interview 2. Admissions and Classification Staff Interviews 3. Random Inmate Interviews During interviews with intake staff who conduct the initial education and facility orientation they explained that initial education is provided to each inmate as they arrive at the facility and how accommodations can be made if needed. Specifically, information could be read to individuals who are blind or cannot read the information themselves. They also stated that materials were available in Spanish and that interpretive services are available if needed. During inmate interviews, most indicated they received PREA information during the intake process and signed for the information they received. Inmates also indicated that the PREA information is available on the tablets. Site Review Observations: 1. Observations during on-site review of physical plant

	(a) During the intake process, Inmates receive and sign the “PREA Brochure Acknowledgment” Intake Sheet which explains PCJ’s zero-tolerance policy towards sexual abuse and sexual harassment, how to make a report, right to be free from abuse, harassment and retaliation for reporting such conduct. The number of inmates admitted during past 12 months who were given this information at intake is 1110. (b) Within 30 days, inmates receive comprehensive PREA education by video or in person. This was addressed with the Jail Administrator. The PCJ reported the number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake was 111 (c) PCJ reported that all inmates receive PREA related materials including those transferred from another facility. (d) Accommodations for inmates with special needs can be made if needed. Specifically, information can be read to individuals who are blind or cannot read the information themselves. They also stated that materials were available in Spanish and that interpretive services are available through Language Line if needed. Signs including the PREA hotline are available in braille. Additionally, the PCJ Inmate Handbook is available in English and Spanish (e) PCJ maintains documentation that inmates receive PREA education at intake in the inmate file. Ten (10) files were reviewed during the onsite audit. All files had documentation of the inmate's initial education and 30 comprehensive education was documented. (f) PCJ provides additional educational materials in inmate housing units and common areas in the form of posters. Additionally, the facility has tablets and tablets in all housing units that also have additional PREA information on them. The facility tour confirmed the existence of additional materials in housing units and common areas. The Auditor has concluded the inmate population at the PCJ is educated in the facility’s zero tolerance policy, how to report allegations, their rights to be free from sexual abuse, sexual harassment, retaliation, and the agency’s policies. PCJ maintains appropriate documentation in the resident file. The Auditor reviewed the agency’s policies, procedures, Inmate Handbook, orientation, acknowledgement form, interviewed staff and residents. Based on the review and analysis of all of the available evidence, the auditor has determined PCJ Facility is fully compliant with this standard.

115.34	**Specialized training: Investigations**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA

Interviews:

1. PREA Coordinator Interview
2. PCSO Investigator

The PREA Coordinator and PCSO Investigator confirmed that investigators have received additional training in accordance with their job responsibilities. Both stated that specialized training included techniques for interviewing sexual abuse victims, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The SCDC ensures that its investigators have received training in conducting sexual abuse investigations in confinement settings; PCSO Investigators are responsible for investigating all allegations of sexual abuse and sexual harassment.

(b) SCDC policy requires special training for staff who conduct sexual abuse investigations. Policy dictates the specialized training include the following topics:

- Techniques for interviewing sexual abuse victims;
- Proper use of Miranda and Garrity warnings;
- Sexual abuse evidence collection in confinement settings; and
- The criteria and evidence required to substantiate a case for administrative action and prosecution referral.

(c) The SCDC maintains and provided documentation that OPR investigators have completed the required specialized training in conducting sexual abuse investigations.

The number of investigators currently employed who have completed the required training is one (1).

(d) Auditor is not required to audit this provision

The Auditor concluded the facility provides appropriate training to investigators that conduct sexual abuse investigations. The Auditor conducted a review of policies,

	procedures, training records, curriculum, and interviewed investigators and determined the agency is fully compliant with the requirements of this standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. Staff Training Records Interviews: 1. Jail Administrator/PREA Coordinator 2. Medical Staff Site Review Observations: 1. Observations during on-site review of physical plant (a) Plymouth County has two contract medical staff for on-site medical services. The number of medical and mental health care practitioners who work regularly at this facility is two (2). (b) The portion of the standard is Not Applicable as all forensic exams are conducted at Floyd Valley Healthcare. Staff interviews confirmed this information. (c) The PCJ provides all staff with training which includes: • The PCJ Zero-Tolerance policies concerning sexual misconduct • How to fulfill their 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 • The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment • The dynamics of sexual abuse and sexual harassment in confinement • The common reactions of 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 Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard

115.41	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ PREA Risk Screening (English/Spanish) Interviews: 1. Jail Administrator/PREA Coordinator Interviews with the Jail Administrator indicated that a Medical screening completed during the intake process asks questions about past victimization. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ assesses all inmates during admission for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. The auditor observed the intake and classification process during the onsite visit. The initial screening is done within the first hour of arrival. (b) PCJ Policy requires: “The intake screening will take place within 72 hours of confinement at the facility. A reassessment of the inmate shall be completed any time following the inmate’s confinement based upon any additional, relevant information received by the facility since the intake screening.” The number of inmates entering the facility (either through intake of transfer) within the past 12 months whose length of stay in the facility was for 72 hours or more and who were screened for risk of sexual victimization or risk of sexually abusing other

inmates within 72 hours of their entry into the facility was 144.

(c) The PREA screening questions are part of the intake process.

(d) The intake screening tool considers the following criteria to assess inmates for risk of sexual victimization or abusiveness:

1. Have you previously been incarcerated in any jail, prison, police lockup, 'community correction or juvenile institution?
2. Are you gay, lesbian, bisexual, transgender or intersex?
3. Have you ever experienced any type of sexual victimization in any jail, prison, police lockup, community correction or juvenile institution?
4. Have you ever experienced any type of sexual victimization in the community?
5. Do you perceive yourself as being vulnerable?
6. Do you have a history of institutional violence or sexual misconduct?
7. Do you have any prior convictions for violent offenses?
8. Do you have prior convictions of any type of sexual misconduct?
9. Do you have a history of sexual aggressive behavior?
10. Have you ever been a victim of sexual harassment?
11. Do you have arty prior convictions for sex offenses against an adult or child?
12. Are you required to register o; have you ever been required to register as a sex offender?
13. Are you detained solely for civil immigration purposes?

PCJ Policy does not require that within thirty (30) days from arrival at the facility, all inmate's will be reassessed to review the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.

The number of inmates entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more and who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 0

(e) PCJ policy requires that All inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.

(f) The PCJ policy states that inmates may not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening questions. Interviews conducted with staff reiterated that inmates would be not disciplined for refusing to answer the screening questions.

(g) The PCJ has 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. That information is kept in a restricted area and only authorized staff can access the information. Information stored in the Jail Management System is password protected. Ten (10) file reviews were completed, Initial PREA Screenings and reassessments were found to be properly completed and filed. **Corrective Action:** **115.41 (f) - PCJ Policy does not require that within thirty (30) days from arrival at the facility, all inmate's will be reassessed to review the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening.** **Please update your policy to include a 30-day reassessment of all inmates and provide documentation reassessments are being completed.** **Update:** **As of February 13th, 2025 Plymouth, County has provided policy language and documentation showing the completion of 30-day reassessments of all inmates.** The PCJ asks screening questions to discover each inmates level of risk of sexual victimization or sexual predation during the intake process and again within 30 days. Additionally, reassessments are completed based upon any new additional information, an incident or referrals. The Auditor reviewed the agency's policies, procedures, Initial Classification and PREA Screenings, PREA Reassessment Forms, Inmate Files and interviewed staff and inmates. Based on the review and analysis of all of the available evidence, the auditor has determined the PCJ is fully compliant with this standard.

115.42	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ PREA Risk Screening (English/Spanish) Interviews: 1. Jail Administrator/PREA Coordinator The Auditor conducted interview with the Jail Administrator/PREA Coordinator and

	random staff. Prior to making housing placements they stated that screening information is reviewed to ensure inmates are protected from likely abusers. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PREA screening questions are part of the intake process. (b) The PCJ does make individualized determinations about how to ensure the safety of each inmate based on information gathered during the risk screening. Random staff interviews confirmed that all information gathered is used to ensure the safety of each inmate. (c) When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, The PCJ determines the inmates housing assignment after review of the inmate records, assessments and an interview with the inmate. (d) PCJ Policy requires that placement and programming assignments for each transgender or intersex inmate is reassessed monthly. (e) PCJ staff meets with transgender or intersex individuals to discuss the inmate's own views with respect to his or her own safety and will give serious consideration when making facility and housing placement decisions and programming assignments. (f) Transgender inmates at the PCJ are given the opportunity to shower separately from other inmates. (g) The PCJ does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates. The PCJ does not have a dedicated unit or wing solely on the basis of identification or status. The Auditor concluded staff is making individualized determinations when assigning inmate's housing, bed, work, programming and education assignments. The PCJ has appropriate policies, procedures and practices in place to protect vulnerable inmates from those identified as potential sexual abusers. The Auditor conducted a thorough review of policies procedures, classification records, screening questions, made observations, interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.43	**Protective Custody**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA

Interviews:

1. Jail Administrator/PREA Coordinator Interview

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The PCJ reported that there were no inmates placed in involuntary segregation pursuant to sexual victimization. If an inmate risk screening identifies that they are high risk, there is a referral for a mental health review. An inmate can request to be taken out of protective custody. Interviews with the Jail Administrator/PREA Coordinator confirmed this practice.

The number of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was (0) zero.

(b) Inmates placed in segregated housing have access to programs, privileges, education, and work opportunities.

(c) The PCJ does not assign inmates at high risk of sexual victimization to involuntary segregated housing, once information is gathered from the risk screening tool an immediate referral is made to the Multidisciplinary Treatment Team to assess the inmates housing as an alternative means of separation from likely abusers. The Sergeant/PREA Coordinator and PREA Coordinator confirmed this this process.

In the past 12 months, the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing for longer than 30 days while awaiting alternative placement was zero (0).

(d) If an inmate is requesting PC the inmate will be interviewed and their request will be documented and forwarded to the PREA Coordinator. The PREA Coordinator will review the request and document their recommendations including why alternative means of separation could not be arranged.

From a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's

	safety, and (b) the reason or reasons why alternative means of separation could not be arranged was zero (0). (e) The PCJ has reported that there are no cases of an inmate being placed in involuntary segregation because he/she is at high risk of sexual victimization. PCJ Policy III - 34 PREA states that the facility reviews whether there is a continuing need for separation from the general population every 7 days. The facility has appropriate procedures in place to ensure inmates identified at high risk of sexual victimization has access to work, program, education and privileges when housed in involuntary protective custody. Policies require reviews of all inmates housed in the segregation housing unit. The Auditor reviewed the agency's policies, procedures, housing records, classification records, interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.51	**Inmate reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. Inmate Rule Book 3. PCJ – “Preventing Sexual Misconduct” Brochure (English/Spanish) Interviews: 1. Random Staff Interview 2. Random Inmate Interviews The Auditor conducted formal interviews with random staff. Each staff member was asked if they are required to accept any and all reports, knowledge and suspicion of sexual abuse and sexual harassment. Staff answered they were. Staff were asked how quickly they are required to report the allegation. Each staff member stated they are required to report the allegation immediately. The Auditor asked each if they were required to document the allegation. The Auditor was informed staff is required to submit a report to document the allegation. Staff was asked how they could privately report allegations of sexual abuse or sexual harassment of inmates. The Auditor conducted formal interviews with inmates. The Auditor asked inmates to explain the various ways available for making a report of sexual abuse or sexual

harassment. Collectively, inmates stated they can tell a staff member, write a request on the tablet, or have someone else make a report for them. Inmates were unaware of reporting methods outside the facility. The Auditor asked each if there were staff, they felt confident they could report an allegation of sexual abuse or sexual harassment to. Most stated they would tell a staff member if they wanted to make an allegation of sexual abuse or sexual harassment. When asked if the inmates felt the allegation would be kept confidential most inmates felt staff would maintain confidentiality. The Auditor asked each inmate if they were able to make an allegation without having to give their name. The inmates interviewed understood they could make an allegation anonymously.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The PCJ provides information that discuss how to report sexual abuse, sexual harassment and retaliation. Inmates are provided and sign for an PCJ Inmate and book at intake which states:

The Plymouth County Sheriff's Office Jail Division allows for internal reporting, by inmates, to report privately to agency officials about Sexual abuse or sexual harassment; Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and Staff neglect or violation of responsibilities that may have contributed to such incidents.

Multiple reporting methods are provided to inmates on the Preventing Sexual Misconduct Brochure.

How to report:

If you were previously housed at the Plymouth County Jail and need to report an allegation of sexual abuse/sexual harassment or to report an allegation of Sexual Abuse/Sexual Harassment on behalf of an individual who is or was housed at the Plymouth County Jail, you may contact any one of the following numbers. Reports can be made over the phone, in person, in writing or anonymously if desired.

Plymouth County Jail (Jail Lt.)

712-546-4419

Plymouth County Attorney's Office

712-546-5019

CASSA (Centers Against Abuse and Sexual Assault)

712-546-6764

Public Defender's Office

	712-279-0202 Housing unit phones require a pin number but no identifying information appears. Use of an outside phone goes directly through to internal investigators and the State Ombudsman's Office. Access to inmate phones is during normal dayroom hours (0700 – 2130). Inmates in special management have access to phones during their recreation time. (b) The PCJ instructs inmates that they can call the State Ombudsman's Office and CASSA Hotline to report sexual abuse and/or harassment if they are uncomfortable with reporting internally. Information about reporting is found in the Inmate Handbook, and on inmate tablets (c) PCJ policy states: *"Plymouth County employees possessing knowledge of incidents or criminal acts of sexual misconduct are required to make notification immediately following the receipt of information made verbally, in writing, anonymously, and from third parties to their Supervisor or higher-ranking officials."* (d) The PCJ policy allows staff to privately report sexual abuse and sexual harassment of inmates The facility provides multiple ways for inmates to report allegations of sexual abuse and sexual harassment, staff neglect and retaliation, including an outside private entity. The facility requires staff to accept, report, and document all allegations of sexual abuse and sexual harassment. The Auditor reviewed the agency's policies, procedures, Inmate Handbook, Inmate education materials, staff training materials, Investigative records, training records, and interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.52	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ Policy III - 28 Inmate Grievance 3. Inmate Rule Book Interviews:

1. PREA Coordinator
2. Random Staff Interview
3. Random Inmate Interviews

Interviews with random inmates and staff confirmed multiple ways an offender could report allegations of sexual abuse or sexual harassment including submitting a grievance. None of the inmates interviewed indicated they had filed a grievance regarding an allegation of sexual abuse or sexual harassment.

The PREA Coordinator explained during his interview that all inmate grievances regarding PREA came to him for a final decision and understood the timeframes for responding to a PREA related grievance.

Site Review Observations:

1. Observations during on-site review of physical plant

The Plymouth County Jail does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. Plymouth County does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse and ensures 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, and such grievance is not referred to a staff member who is the subject of the complaint. Plymouth County issues 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 Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and are also be permitted to file such requests on behalf of inmates. Plymouth County has established procedures for the filing of an emergency grievance when the inmate is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a substantial risk of imminent sexual abuse, Plymouth County immediately forwards the to a level of review at which immediate corrective action is taken, and provides an initial response within 48 hours, and issues a final agency decision within 5 calendar days. The initial response and final agency decision documents Plymouth County’s determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The Plymouth County Jail may discipline a detainee for filing a grievance related to alleged sexual abuse only where it can be demonstrated that the inmate filed the grievance in bad faith.

Plymouth County has not received any detainee grievances regarding a PREA related incident in the past twelve (12) months.

Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. MOU CASSA Interviews: 1. Jail Administrator/PREA Coordinator Interview 2. Random Staff Interview 3. Random Inmate Interviews The Auditor conducted a formal interview with the Jail Administrator/PREA Coordinator. The Jail Administrator/PREA Coordinator stated victim advocates can accompany an inmate victim of sexual abuse during the forensics Examination, during criminal interviews and meet with inmates as needed for follow-up care. During a phone interview with CASSA they stated that victim advocates can accompany the victim when requested by the victim and the advocate is contacted by the facility, law enforcement or hospital to accompany the victim. The Auditor asked the advocate if other supportive services are provided to inmates. The advocate stated other crisis intervention and supportive services are offered including ono-on-one counseling. The advocate stated inmates can contact them through the hotline or by confidential written correspondence. The Auditor conducted formal interviews with inmates. Each inmate was asked if the facility provides them with contact information of a community organization that provides emotional support services to sexual abuse victims. Not all inmates interviewed were aware of the community support services. The inmates who stated they were not aware were asked if they have noticed posters on the walls in the living units and other areas in the facility. The inmates had noticed information posted on the walls and stated they have not read them. Those inmates were also asked if they were provided information during the intake process and if received an Inmate Handbook. They had been provided each but stated they have not read the information. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates an inmate handbook and

	PREA information sheet during the intake process. The information includes PCJ's zero-tolerance policy, how to make a report and how to access the CASSA for support services. During intake, inmates are provided CASSA's toll-free hotline number (877) 362-4612) and it is available in the inmate handbook on the kiosk and tablets. (b) The PCJ uses CASSA to provides inmates with access to outside victim advocates for emotional support services related to sexual abuse. (c) The PCJ informs inmates that confidential communication with outside resources is available. (d) The PCJ uses CASSA to provide inmates with confidential emotional support services related to sexual abuse. **Corrective Action:** **PCJ provides inmates information about CASSA however, documentation was not provided showing they have an MOU or have attempted to enter into an MOU or other agreement with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse.** **Please provide documentation showing you have an MOU or have attempted to enter into an MOU or other agreement with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse.** **Update:** **As of March 12th, 2025 Plymouth County has provided documentation of their MOU with CASSA.** The Auditor reviewed the agency's policies, procedures, Inmate Handbook, Inmate education materials, staff training materials, Zero-Tolerance Poster, Memorandum of Understanding, Investigative records, training records, and interviewed staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.54	**Third-party reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA
2. PCJ – Website https://plymouthcountysheriff.com/wp-content/uploads/2022/05/PRISON-RAPE-ELIMINATION-ACT.pdf

Interviews:

1. Random Staff Interview
2. Random Inmate Interviews

Staff were asked during interviews if they were required to accept third-party reports of sexual abuse or sexual harassment. Each staff member informed the Auditor they are required to accept all allegations of sexual abuse and sexual harassment. Staff informed the Auditor they accept the report, immediately inform a supervisor, and promptly document the allegation on a report.

The Auditor asked inmates if they understood they could have a family member, other inmate or any other person report an allegation on their behalf; inmates understood they could.

Site Review Observations:

1. Observations during on-site review of physical plant

(a,b) The PCJ accepts and investigates third-party reports of sexual abuse and harassment. Information is posted in the visiting area and available on the PCJ website.

PRISON RAPE ELIMINATION ACT

The Prison Rape Elimination Act (PREA) was passed in 2003 with unanimous support from both parties in

Congress. The purpose of the act was to “provide for the analysis of the incidence and effects of prison rape in Federal, State, and local institutions and to provide information, resources, recommendations and funding to protect individuals from prison rape.” (Prison Rape Elimination Act, 2003). In addition to creating a mandate for significant research from the Bureau of Justice Statistics and through the National Institute of Justice, funding through the Bureau of Justice Assistance and the National Institute of Corrections supported major efforts in many state correctional, juvenile detention, community corrections, and jail systems.

This agency has zero-tolerance for any type of sexual misconduct of inmates (by inmates and staff). Sexual conduct between inmates and staff regardless of consensual status is PROHIBITED!

How to Report:

If you were previously housed at the Plymouth County Jail and need to report an

	allegation of sexual abuse/sexual harassment or to report an allegation of Sexual Abuse/Sexual Harassment on behalf of an individual who is or was housed at the Plymouth County Jail, you may contact any one of the following numbers. Reports can be made over the phone, in person, in writing or anonymously if desired. **Plymouth County Jail (Jail Lt.)** 712-546-4419 **Plymouth County Attorney's Office** 712-546-5019 **CASSA (Centers Against Abuse and Sexual Assault)** 712-546-6764 **Public Defender's Office** 712-279-0202 The Auditor determined the PCJ accepts all reports, including third-party reports, of sexual abuse and sexual harassment. The public is informed through the facility's website how to make third-party reports on behalf of inmates. The Auditor reviewed the agency's policies, procedures, website, investigative reports, training and education documents, Inmate Handbook, posters, conducted interviews with staff, contractors and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.61	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview 2. Random Staff Interview 3. Random Inmate Interviews Site Review Observations:

1. Observations during on-site review of physical plant

(a) The PCJ requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. It also requires 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. Lastly, staff must report immediately and according to 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. Interviews conducted with staff showed they understood their duty to report any instances or suspected instances of sexual abuse. Staff was also aware of their duty not to discuss the allegations.

(b) Apart from reporting to designated supervisors or officials, the PCJ staff refrains 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. The staff was able to clearly articulate during the interviews the importance of keeping the information confidential.

(c) The PCJ does not have in hose medical or mental health staff. However, the PCJ has provided information to community health provides to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services

(d) The PCJ does not regularly house inmates under the age of 18, if the victim is considered a vulnerable adult staff must report the allegation to the designated State or local services agency under applicable mandatory reporting laws

(e) PCJ staff report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the Jail Administrator/PREA Coordinator for investigation. Staff interviewed where aware of their reporting responsibilities.

The Auditor concluded staff and contractors are aware of the requirement to report any knowledge, suspicion, or information related to sexual abuse and sexual harassment. Staff understands the requirement to maintain confidentiality with the information. Interviews with medical and mental health practitioners reveal they understand the requirements for reporting sexual abuse which occurred in the community, in a confinement setting. The Auditor reviewed agency policies, procedures, investigative reports, training materials, interviewed staff, medical and mental health practitioners and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview 2. Random Staff Interview Site Review Observations: 1. Observations during on-site review of physical plant (a) According to PCJ Policy, when the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, the agency will take immediate action to protect the inmate. In the past 12 months, the number of times the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse was zero (0). The Auditor concluded the PCJ takes immediate and appropriate actions to ensure the protection of inmates who are identified at a substantial risk of imminent sexual abuse. The Auditor reviewed facility policies, procedures, classification records, investigative records, housing records, conducted interviews with staff and inmates, made observations and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA

	Interviews: 1. Jail Administrator/PREA Coordinator Interview Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy states that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the Jail Administrator/PREA Coordinator will notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The PCJ provided documentation for this process. This practice was verified by the Jail Administrator/PREA Coordinator. In the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was zero (0). (b) Per policy, the notification is provided as soon as possible, but no later than 72 hours after receiving the allegation. (c) The PCJ does document that it has provided such notification. (d) The Jail Administrator/PREA Coordinator initiates an investigation on any notifications that they receive from another facility. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero (0). The PCJ Jail Administrator/PREA Coordinator fully understands the requirement to report allegations to other confinement facilities and to ensure allegations received are investigated. Staff members at the PCJ understand the agency's requirement to immediately report allegations of sexual abuse and sexual harassment so allegations can be investigated. The Auditor reviewed the agency's policies, procedures, completed notifications and interviewed staff and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.64	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA

Interviews:

1. Jail Administrator/PREA Coordinator Interview
2. PREA Coordinator
3. Random Staff Interviews

Site Review Observations:

1. Observations during on-site review of physical plant

(a) PCJ staff upon learning of an allegation that an inmate was sexually abused, and is the first security staff member to respond to the report is required to separate the alleged victim and abuser, preserve and protect any crime scene until appropriate steps can be taken to collect any evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence and 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. All staff interviewed had a good understanding of their duties.

In the past 12 months, the number of allegations that an inmate was sexually abused was zero (0).

Of these allegations of sexual abuse in the past 12 months, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was zero (0).

In the past 12 months, the number of allegations where staff were notified within a time period that still allowed for the collection of physical evidence was zero (0).

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence was zero (0).

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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 was zero (0).

	Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating was zero (0). (b) If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero (0). Of those allegations responded to first by a non-security staff member, the number of times that staff member requested that the alleged victim not take any actions that could destroy physical evidence was zero (0). Of those allegations responded to first by a non-security staff member, the number of times that staff member notified security staff zero (0). The Auditor determined both security and non-security personnel are knowledgeable in their duties as first responder. The Auditor reviewed agency policies, procedures, investigative records, training records, conducted interviews with staff and contractors and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.65	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview 2. PCSO (Investigator) Interview

	The Auditor conducted formal interviews with security staff who act as first responders. Each was asked to explain the actions they take following an incident of sexual abuse. Each staff member understood their responsibilities when responding to an incident of sexual abuse. Staff provided answers consistent with PCJ's coordinated response plan. Facility leadership and supervisors articulated their responsibilities in accordance with PCJ's coordinated response plan. The Auditor conducted formal interviews with facility medical and mental health staff. Each explained their responsibilities in response to a sexual abuse incident. The Assistant Jail Administrator/PREA Coordinator informed the Auditor of their responsibilities while conducting an administrative investigation and coordinating and assisting in criminal investigations conducted by the PCSO. Site Review Observations: 1. Observations during on-site review of physical plant (a) The PCJ has developed a written institutional plan according to the policy to coordinate actions among staff first responders, investigators, and facility leadership taken in response to an incident of sexual abuse. The Auditor determined PCJ's coordinated response plan includes actions to ensure personnel respond appropriately to incidents of sexual abuse. The Auditor reviewed policies, procedures, investigative records and interviewed staff to determine the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.66	**Preservation of ability to protect inmates from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview Site Review Observations:

1. Observations during on-site review of physical plant

Plymouth County collective bargaining agreements do not prevent the removal of staff accused of sexual abuse from contact with inmates pending the outcome of an investigation. Plymouth County may remove alleged staff sexual abusers from contact with any inmates or place an employee on administrative leave pending the outcome of an investigation.

Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA

Interviews:

1. Jail Administrator/PREA Coordinator

Site Review Observations:

1. Observations during on-site review of physical plant

(a) The PCJ has established policies to protect all inmates and staff that report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and shall designate which staff members or departments are charged with monitoring retaliation. The PCJ has designated the PREA Coordinator to conduct the monitoring.

(b) The PCJ has 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

(c) The PREA Coordinator will for at least 90 days following a report of sexual abuse, monitor the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and shall act promptly to remedy any such retaliation. The PREA Coordinator also monitors any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The PREA Coordinator may continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need. The number of times an incident of retaliation occurred in the past 12 months was zero (0). (d) The PREA Coordinator conducts status checks and that information is documented on the 90-day Review and Tracking form. (e) The PREA Coordinator also monitors any individual who cooperates with an investigation and who expresses a fear of retaliation, and they will take appropriate measures to protect that individual against retaliation. The PCJ has designated a specific staff (PREA Coordinator) responsible for monitoring acts of retaliation against inmates and staff as required by this standard. The staff member responsible for monitoring for retaliation was well educated in her responsibilities of such. The Auditor reviewed the agency's policies and procedures, investigative reports, monitoring forms and conducted formal interviews with staff and inmates and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.68	**Post-allegation protective custody**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy states that an inmate is admitted into protective custody when there is documentation that protective custody is warranted and no reasonable alternative is

	available. The number of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment was zero (0). The number of inmates who allege to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement was zero (0). From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facility's concern for the inmate's safety, and (b) the reason or reasons why alternative means of separation could not be arranged was zero (0). The Auditor concluded the PCJ has a policy that includes the elements of PREA standard 115.43 to ensure inmates receive privileges, programming, education, and work opportunities when placed in Protective Custody after suffering sexual abuse. The Auditor reviewed the agency's policies, procedures, classification records, housing records, made observations, and interviewed staff to determine the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.71	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator 2. PCSO (Investigator) Interview The Jail Administrator/PREA Coordinator and PCSO Investigators indicated that administrative investigations are completed by the PCJ and that criminal investigations are turned over to the PCSO and that the PCJ cooperates fully and provides all documentation to outside investigators. The Jail Administrator/PREA Coordinator stated that any physical evidence pertaining to a criminal investigation

would be collected by the PCSO. Interviews confirm that the credibility of an alleged victim, suspect or witness is on an individual basis and not on the basis of that individual's status as an inmate or staff.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) PCJ policy ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

(b) PCJ investigators receive specialized training in sexual abuse investigations as required by 115.34.

(c) PCSO Investigators will gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. All of the internal reports will be provided to the PCSO as soon as possible.

(d) The PCSO is responsible for the criminal investigations that maybe referred for prosecution.

The number of substantiated allegations of conduct that appear to be criminal that were referred for prosecution PCJ's last PREA audit was zero (0)

(e) The PCJ investigates all allegations of sexual abuse and refer matters to the PCSO as warranted.

(f) PCJ conducts administrative investigations in an effort to determine whether staff actions or failures to act contributed to the abuse. All reports include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and finding.

(g) PCJ staff provides to the PCSO for criminal investigations a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

(h) The PCJ retains all written reports referenced for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

(i) PCJ policy states the departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

(j) Auditor not required to audit this provision

(k) PCJ staff provides all of the internal reports to the PCSO as soon as possible following an allegation. The PCJ cooperates with PCSO as requested.

	The Auditor determined that PCJ investigators conduct appropriate, objective and thorough sexual abuse and sexual harassment investigations. Facility Investigators have received appropriate training to conduct sexual abuse and sexual harassment investigations in a confinement setting. Each allegation including sexual harassment and sexual abuse is investigated by a trained facility Investigator. The facility referred all criminal allegations to the PCSO for criminal investigation. The Auditor reviewed facility policy, procedures, investigative records, training records, interviewed staff and determined the facility meets the requirements of this standard. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.72	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator 2. PCSO (Investigator) Interview During interviews with investigators the auditor was informed the agency's policy requires investigators use a preponderance of evidence to substantiate an allegation of sexual abuse or sexual harassment. The Investigators were questioned about the meaning of preponderance. Both explained preponderance is more evidence one way or the other. Investigators stated 51 percent would substantiated the allegation. Site Review Observations: 1. Observations during on-site review of physical plant (a) In accordance with PCJ policy, the PCJ imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. Interviews will the investigative staff confirmed this statement. The Auditor reviewed investigation reports, which reveal facility investigators are using a preponderance of evidence to substantiate an allegation of sexual abuse and

	sexual harassment. The Auditor determined facility Investigators utilize a preponderance of evidence as the basis to substantiate sexual abuse and sexual harassment allegations. The Auditor reviewed the agency's policy; procedures, investigative report and interviewed facility investigators. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.73	**Reporting to inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator 2. PCSO (Investigator) Interview During interviews, the Jail Administrator/PREA Coordinator informed the Auditor that they notify inmates of the results of an investigation at the conclusion of the investigation. The Auditor asked who informs the victim when criminal charges are placed on the abuser or the abuser has been convicted. The PREA Coordinator or PREA Compliance Manager would make those notifications when they are received from the PCSO. The Auditor was informed by the Jail Administrator/PREA Coordinator that they maintain a good working relationship with the PCSO and would have no problem obtaining that information. Site Review Observations: 1. Observations during on-site review of physical plant (a) Following an investigation into an inmate's allegation that he or she suffered sexual abuse the PCJ informs the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The notification is in writing regardless of the outcome of the investigation. The number of criminal and/or administrative investigations of alleged inmate sexual

	abuse that were completed by the agency/facility in the past 12 months was zero (0). Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation was zero (0). (b) The PCJ requests relevant information from the PCSO who is responsible for conducting the criminal investigation in order to inform the inmate. The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero (0). Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation was zero (0) (c) Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the PCJ will subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever: the staff member is no longer posted within the inmate's unit, the staff member is no longer employed at the facility, the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. In the past 12 months, the number of notifications made to inmates and documented that were provided pursuant to this section of the standard was zero (0) (d) Following an inmate's allegation that he or she has been sexually abused by another inmate, the PCJ will 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 or the PCJ learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. In the past 12 months, the number of notifications made to inmates and documented that were provided pursuant to this section of the standard was zero (0) (e) All such notifications or attempted notifications are documented and the notifications are kept in the investigative file. (f) Auditor is not required to audit this provision The Auditor concluded the PCJ informs inmates of investigative findings after the conclusion of an investigation. The Auditor reviewed facility policies, procedures, notifications to inmates and conducted interviews with Investigators. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.76	**Disciplinary sanctions for staff**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard:

1. PCJ Policy III - 34 PREA

Interviews:

1. Jail Administrator/PREA Coordinator Interview
2. Random Staff Interviews

During interviews with PCJ staff, each staff member was aware of the agency's policy making termination the presumptive disciplinary sanction for engaging in an act of sexual abuse. The facility's command staff has a zero-tolerance approach and disciplines staff for violating the agency's sexual abuse and sexual harassment policies. Interviews with command staff reveal the facility recommends termination of a staff member who engages in sexual abuse with an inmate.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) PCJ Policy states:

Disciplinary sanctions for violations of Plymouth County Jail policies relating to sexual misconduct (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories.

(b) The policy states termination is presumptive disciplinary sanction for staff who has engaged in sexual abuse.

All terminations for violations of Plymouth County Jail sexual misconduct policies, or resignations by employees who would have been terminated if not for their resignation, shall be reported to applicable local law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

In the past 12 months, the number of staff from the facility who have violated agency sexual abuse or sexual harassment policies was zero (0).

In the past 12 months, the number of those staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was zero (0).

(c) The PCJ policy addresses the sanctions for violations of agency policies relating to

	sexual abuse and harassment shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse) was zero (0) (d) The terminations for violations of agency sexual abuse and harassment or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination (or resignation prior to termination) for violating agency sexual abuse or sexual harassment policies was zero (0). The PCJ has appropriate policies to ensure agency personnel who violate sexual abuse or sexual harassment policies are appropriately disciplined and that appropriate agencies are notified. The Auditor conducted a review of the agency's policies, procedures, investigative files and disciplinary records and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.77	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the

	activity was clearly not criminal, and to relevant licensing bodies. PCJ Policy III - 34 PREA : Any contracted personnel or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to applicable local law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of inmates was zero (0) (b) The PCJ takes appropriate remedial measures, and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. PCJ Policy III - 34 PREA The facility will take appropriate remedial measures, and shall consider whether to prohibit further contact with inmates, in the case of any other violation of PCJ policies by contracted personnel or volunteers. Volunteers and contract staff are made aware of the agency's sexual abuse and sexual harassment policies during their initial orientation. Training is provided to contractors and volunteers by facility personnel. At the completion of their training each signs an acknowledgement form noting their understanding of the provided training. The training educates volunteers and contract staff that violations of sexual abuse and sexual harassment policies are subject to removal as well as criminal prosecution. The Auditor verified all volunteers and contractors received the training. The PCJ maintains appropriate policies to ensure contract staff and volunteers at the PCJ are removed from inmate contact after committing an act of sexual abuse or sexual harassment. The Auditor reviewed the agency's policies, procedures, and training documents. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.78	**Disciplinary sanctions for inmates**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PCJ Inmate Handbook

Interviews:

1. Jail Administrator/PREA Coordinator

During an interview with the Jail Administrator/PREA Coordinator the Auditor asked if they had placed disciplinary charges against an inmate for violating sexual abuse and sexual harassment policies. The Auditor was informed disciplinary charges are placed on inmates following a criminal or administrative finding of sexual abuse or harassment. The Auditor asked if an inmate had ever been disciplined for filing a false allegation. He was not aware of any.

Site Review Observations:

1. Observations during on-site review of physical plant

(a) Inmates at the PCJ are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are made aware of the disciplinary process which is located in the PCJ Inmate Handbook.

In the past 12 months, the number of administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility was zero (0).

In the past 12 months, the number of criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility was zero (0).

(b) The PCJ Inmate Handbook reflects that sanctions shall be 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.

(c) The PCJ disciplinary process considers whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

(d) The PCJ does not offer programming such as therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse.

(e) The PCJ will discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

(f) For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

(g) The PCJ has a zero-tolerance policy concerning sexual contact.

	The Auditor discovered the agency maintains policies that align with PREA standard 115.78 Discipline Sanctions for Inmates. Facility personnel ensure the policy is applied when choosing whether to discipline an inmate for reporting or participating in an act of sexual abuse. The Auditor reviewed the facility's policies, procedures, investigative records, interviewed staff, medical and mental health practitioners. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.81	**Medical and mental health screenings; history of sexual abuse**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) This provision is Not Applicable, this section only applies to prisons (b) This provision is Not Applicable, this section only applies to prisons (c) PCJ policy states that if the PREA screening questions indicate that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff may offer a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. (d) Any information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. Medical and Mental Health staff are directed to notify PCJ security staff immediately upon learning of any information regarding sexual abuse. (e) The PCJ does not regularly house inmates under the age of 18. 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. The Auditor concluded inmates are offered a follow-up with a medical or mental health practitioner after reporting they have suffered sexual victimization. Medical and mental health practitioners inform only staff who inform decision regarding information related to sexual victimization or abusiveness. The Auditor reviewed the agency's policies, procedures, inmate medical and classification records, conducted interviews with medical and mental health practitioners and inmates. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.82	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA 2. PREA First Responder Procedure Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy states inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment. (b) PCJ staff act as security staff first responders, if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, the security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners. (c) PCJ staff confirmed that inmate victims of sexual abuse while incarcerated shall be 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. (d) 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 Auditor determined the facility provides inmates access to timely and unimpeded emergency medical services. Medical practitioners provide inmate victims with sexually transmitted infections prophylaxis. The Auditor reviewed the agency's policies, procedures, medical records, investigative records, Inmate handbook and interviewed staff, victim advocates and inmates. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.83	**Ongoing medical and mental health care for sexual abuse victims and abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) Whenever an employee knows or suspects, or receives an allegation from any source regarding patient sexual abuse, the employee will immediately notify the Responsible Health Authority. (b) Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, Hepatitis B) are offered to all victims, as appropriate. (c) Victims of sexual abuse will be referred to a community facility or local emergency room for treatment or gathering of forensic evidence. (d) Inmate victims of sexually abusive vaginal penetration while incarcerated shall be

	offered pregnancy tests. (e) If pregnancy results from conduct specified in paragraph (d) of this section, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy related medical services. (f) Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. (g) Medical co-payment fees are not imposed to inmates for any medical services. (h) Mental Health - After any emergency treatment is provided, health care staff will notify mental health staff of event. An immediate referral, including after hours, is the preferred referral format in case of an abuse. The facility's medical and mental health practitioners offer counseling, treatment, sexually transmitted infection prophylaxis, testing and make referrals for continued care when necessary. The services provided to inmate victims are consistent with a community level of care. The Auditor reviewed policies, procedures, medical records, interviewed medical and mental health practitioners and the forensic nurse. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.86	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Interview Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy requires 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.

	In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents was zero (0). (b) Reviews ordinarily occur within 30 days of the conclusion of the investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents was zero (0). (c) The review team includes upper-level management officials, with input from line supervisors, investigators, and medical and mental health practitioners (d) The review team considers whether the allegation and/or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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. The review team examines the area of the facility where the incident occurred to assess whether physical barriers in the area may enable abuse. The review team assesses the adequacy of staffing levels in that area during different shifts and whether monitoring technology should be deployed or augmented to supplement supervision by staff. (e) PCJ policy requires the implementation of recommendations or documents its reasons for not doing so. The Auditor determined the facility does conduct incident reviews within 30 days of the conclusion of each substantiated and unsubstantiated sexual abuse investigation. The Incident Review Team documents the performance of each incident review. The Auditor reviewed the agency’s policies, procedures, Incident Review reports, training records, investigative record and conducted interviews with staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.87	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews:

1. Jail Administrator/PREA Coordinator

Site Review Observations:

1. Observations during on-site review of physical plant

(a) PCJ policy requires the collection of accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. This includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

(b) Policy states PCJ maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(c) The PCJ does not contract for the confinement of its inmates.

Policy requires PCJ provide upon request, all such data from the previous calendar year to the Department of Justice.

Corrective Action:

Although policy requires the collection of accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions which includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. PCJ had no annual report showing the collection of data at the time of the onsite audit.

Please provide documentation showing the collection of accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions which includes data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice.

Update:

As of March 12th, 2025 Plymouth County has provided an annual report showing the collection of data as required by this standard.

The Auditor observed evidence the facility collects and aggregates and analyses sexual abuse data annually. The reported data is derived from a standardized set of definitions. The Auditor reviewed the agency's policies, procedures, website, Annual Report and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy requires that data is 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 by identifying problem areas, taking corrective action on an ongoing basis and prepares an annual report of its findings. (b) PCJ policy requires the annual report to 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. (c) The PCJ website included information about their PREA policy but did not include their annual report as required by this standard. (d) PCJ policy requires that specific material are redacted from the report when publication would present a clear and specific threat to the safety and security of a facility. **Corrective Action:** **PCJ policy requires that data is 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 by identifying problem areas, taking corrective action on an ongoing basis and prepares an annual report of its findings. However, the PCJ did not provide documentation showing the annual report is completed as required and posted on their website at the time of the onsite audit.** **Please provide documentation showing the annual report is completed as required and posted on your website.**

	Update: **As of March 12th, 2025, Plymouth County has provided documentation showing their annual report is completed as required and posted on their website.** The Auditor concluded the agency completes an annual review of collected and aggregated sexual abuse data and includes such data from the review in an annual report. The facility attempts to addresses problem areas and corrective actions taken on an annual basis. The annual report is approved by the Sheriff and published on the agency's website. The Auditor reviewed the agency's policies, procedures, website, Annual Report and interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.89	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The Plymouth County Jail (PCJ) provided the following documents to assist the auditor in determining compliance with the standard: 1. PCJ Policy III - 34 PREA Interviews: 1. Jail Administrator/PREA Coordinator Site Review Observations: 1. Observations during on-site review of physical plant (a) PCJ policy requires that data collected pursuant to § 115.87 is securely retained. (b) At the time of the audit the PCJ did not make all aggregated sexual abuse data available to the public through its website. (c) PCJ policy requires the removal of all personal identifiers before making aggregated sexual abuse data publicly available. (d) The PCJ maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection.

	Corrective Action: **PCJ policy requires that data is 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 by identifying problem areas, taking corrective action on an ongoing basis and prepares an annual report of its findings. However, the PCJ did not provide documentation showing the annual report is completed as required and posted on their website at the time of the onsite audit.** **Please provide documentation showing the annual report is completed as required and posted on your website.** U**pdate:** **As of March 12th, 2025, Plymouth County has provided documentation showing their annual report is completed as required and posted on their website.** The Auditor reviewed the facility's policy, procedures, website, annual report, interviewed staff. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This was Plymouth County Jail's third audit of the PREA standards. During the on-site visit the auditor was afforded access to all areas of the facility, allowed to interview inmates and staff in private, and was provided with all necessary documentation to complete a thorough audit. Contact information for this auditor was visible in all areas of the facility. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This was Plymouth County Jail's third PREA Audit. The Plymouth County Jail ensures

	that final reports will be published on their website. Based upon the review and analysis of all of the available evidence, the auditor has determined that the agency is fully compliant with this standard.

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

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

	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	**Protective Custody**	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	**Protective Custody**	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	**Inmate reporting**	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b)	**Inmate reporting**	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain	yes

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	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	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	**Exhaustion of administrative remedies**	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	**Exhaustion of administrative remedies**	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	**Inmate access to outside confidential support services**	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	yes

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

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

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

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

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

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

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	**Criminal and administrative agency investigations**	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	**Criminal and administrative agency investigations**	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	**Criminal and administrative agency investigations**	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	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	yes

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

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

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

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

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	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.)	na
115.87 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na
115.88 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

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

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

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