

# PREA Facility Audit Report: Final

**Name of Facility:** Pickaway Correctional Institution

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 12/17/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
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.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Valerie Wolfe Mahfood	<b>Date of Signature:</b> 12/17/2022

AUDITOR INFORMATION	
<b>Auditor name:</b>	Mahfood, Valerie Wolfe
<b>Email:</b>	wolfemahfood@aol.com
<b>Start Date of On-Site Audit:</b>	10/31/2022
<b>End Date of On-Site Audit:</b>	11/02/2022

FACILITY INFORMATION	
<b>Facility name:</b>	Pickaway Correctional Institution
<b>Facility physical address:</b>	11781 State Route 762 #2, Orient, Ohio - 43146
<b>Facility mailing address:</b>	Ohio

<b>Primary Contact</b>	
<b>Name:</b>	Robert Hartley
<b>Email Address:</b>	Robert.Hartley@odrc.state.oh.us
<b>Telephone Number:</b>	614 877-4362 #55297

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Rochelle Moore
<b>Email Address:</b>	Rochelle.Moore@odrc.state.oh.us
<b>Telephone Number:</b>	614 877-4362

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Robert Hartley
<b>Email Address:</b>	robert.hartley@odrc.state.oh.us
<b>Telephone Number:</b>	

<b>Facility Health Service Administrator On-site</b>	
<b>Name:</b>	Mary Roush
<b>Email Address:</b>	Mary.Roush@odrc.state.oh.us
<b>Telephone Number:</b>	614 877-4362

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	1862
<b>Current population of facility:</b>	1773
<b>Average daily population for the past 12 months:</b>	1761
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Males
<b>Age range of population:</b>	18-87
<b>Facility security levels/inmate custody levels:</b>	Level 1, Level 2 and Level 3
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	381
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	96
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	248

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Ohio Department of Rehabilitation and Correction
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	4545 Fisher Road, Suite D, Columbus, Ohio - 43228
<b>Mailing Address:</b>	
<b>Telephone number:</b>	

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	David Kollar	<b>Email Address:</b>	david.kollar@odrc.state.oh.us

## 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:

11

- 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.13 - Supervision and monitoring
- 115.14 - Youthful inmates
- 115.15 - Limits to cross-gender viewing and searches
- 115.18 - Upgrades to facilities and technologies
- 115.51 - Inmate reporting
- 115.54 - Third-party reporting
- 115.71 - Criminal and administrative agency investigations
- 115.82 - Access to emergency medical and mental health services
- 115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers
- 115.401 - Frequency and scope of audits

### Number of standards met:

34

### 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:	2022-10-31
2. End date of the onsite portion of the audit:	2022-11-02

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Just Detention International, Sexual Assault Response Network of Central Ohio

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1862
15. Average daily population for the past 12 months:	1761
16. Number of inmate/resident/detainee housing units:	11
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

# **Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit**

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

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	1717
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	117
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	318
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	22
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	15
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	6

<p><b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>24</p>
<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>6</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>5</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>7</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>NA</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>381</p>

<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>262</p>
<p><b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>94</p>
<p><b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>NA</p>

## INTERVIEWS

### Inmate/Resident/Detainee Interviews

#### Random Inmate/Resident/Detainee Interviews

<p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>20</p>
<p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p><input checked="" type="checkbox"/> Age</p> <p><input checked="" type="checkbox"/> Race</p> <p><input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)</p> <p><input checked="" type="checkbox"/> Length of time in the facility</p> <p><input checked="" type="checkbox"/> Housing assignment</p> <p><input checked="" type="checkbox"/> Gender</p> <p><input checked="" type="checkbox"/> Other</p> <p><input type="checkbox"/> None</p>

<p><b>If "Other," describe:</b></p>	<p>Custody, Job Assignment, Program Activity, Physical Characteristics, Psychological Characteristics, Primary Language Spoken, or other distinguishing factors amongst population.</p>
<p><b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>Housing rosters</p>
<p><b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No barriers to completing interviews were noted.</p>
<p><b>Targeted Inmate/Resident/Detainee Interviews</b></p>	
<p><b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>21</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	5
<b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1
<b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b>	2
<b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b>	7

<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>5</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>3</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>5</p>
<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Reviewed facility documentation. Asked Random Staff if any inmates were ever placed in segregated housing for the risk of sexual victimization or for having alleged to have been a victim of sexual abuse. Asked Random and Targeted residents if inmates were ever placed in segregated housing for the risk of sexual victimization or for having alleged to have been a victim of sexual abuse.</p>
--	--

<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>NA</p>
--	-----------

## Staff, Volunteer, and Contractor Interviews

### Random Staff Interviews

<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>12</p>
--	-----------

<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p> <input checked="" type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None </p>
--	--

<p><b>If "Other," describe:</b></p>	<p>Gender, race, ethnicity, languages spoken, or other distinguishing factors amongst staff relative to their employment</p>
-------------------------------------	--

<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p> <input checked="" type="radio"/> Yes  <input type="radio"/> No </p>
---	---

<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>NA</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>21</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>78. Were you able to interview the PREA Coordinator?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>79. Were you able to interview the PREA Compliance Manager?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>

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

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

	<input checked="" type="checkbox"/> Intake staff  <input checked="" type="checkbox"/> Other
<b>If "Other," provide additional specialized staff roles interviewed:</b>	Commissary, Mailroom Staff, Chaplain, and contracted SAFE/SANE staff assigned to local hospital
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	1
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming  <input type="checkbox"/> Medical/dental  <input type="checkbox"/> Mental health/counseling  <input checked="" type="checkbox"/> Religious  <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	3

<p><b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b></p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input checked="" type="checkbox"/> Medical/dental</p> <p><input checked="" type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
--	---

<p><b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b></p>	<p>NA</p>
--	-----------

# 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.

<p><b>84. Did you have access to all areas of the facility?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
---	---

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

<b>85. 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)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>88. Informal conversations with staff during the site review (encouraged, not required)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b>	NA

**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.

<b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
---	--

**91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).**

Documentation selected to correspond with inmates/staff interview notes.

# SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	<b># of sexual abuse allegations</b>	<b># of criminal investigations</b>	<b># of administrative investigations</b>	<b># of allegations that had both criminal and administrative investigations</b>
<b>Inmate-on-inmate sexual abuse</b>	3	3	3	3
<b>Staff-on-inmate sexual abuse</b>	2	2	2	2
<b>Total</b>	5	5	5	5

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

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

## **Sexual Abuse and Sexual Harassment Investigation Outcomes**

### **Sexual Abuse Investigation Outcomes**

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
<b>Inmate-on-inmate sexual abuse</b>	1	1	1	00	00
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual abuse</b>	0	1	1	1
<b>Staff-on-inmate sexual abuse</b>	0	0	0	2
<b>Total</b>	0	1	1	3

**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.

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

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

**Sexual Abuse Investigation Files Selected for Review**

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

5

<p><b>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
---	--

### **Inmate-on-inmate sexual abuse investigation files**

<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>3</p>
--	----------

<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
--	---

<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
--	---

### **Staff-on-inmate sexual abuse investigation files**

<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>2</p>
---	----------

<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
---	--

<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
---	--

**Sexual Harassment Investigation Files Selected for Review**

<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
--	----------

<p><b>a. Explain why you were unable to review any sexual harassment investigation files:</b></p>	<p>PCI did not receive any allegations of sexual harassment during the audit time frame.</p>
---	--

<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
---	---

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

<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
---	----------

<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
---	--

<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>PCI did not receive any allegations of sexual harassment during the audit time frame.</p>

# SUPPORT STAFF INFORMATION

## DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the 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

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the 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

121. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

Identify the name of the third-party auditing entity

American Correctional Association

## 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.

<p><b>115.11</b></p>	<p><b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b></p> <p><b>Auditor Overall Determination:</b> Exceeds Standard</p> <p><b>Auditor Discussion</b></p> <p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• Ohio Department of Rehabilitation and Correction (ODRC) Bureau of Operational Compliance Hierarchical Chart</li> <li>• Pickaway Correctional Institution (PCI) Hierarchical Chart, 8-29-22</li> <li>• PCI #03E-01 PCI, Prison Rape Elimination, 4-20-21</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Agency PREA Coordinator</li> <li>• PCI Operation Compliance Manager</li> <li>• PCI Facility Warden</li> <li>• Intermediate or Higher-Level Facility Staff</li> <li>• Random Staff</li> </ul> <p>Site Review Observations:</p> <ul style="list-style-type: none"> <li>• The Ohio Department of Rehabilitation and Correction PREA Coordinator oversees the Pickaway Correctional Institution (PCI) PREA program.</li> <li>• The PCI Operation Compliance Manager is physically assigned to the PCI and maintains a permanent office, with routine activities, within said institution as a function of assignment.</li> </ul>
----------------------	--

Standard Subsections:

(A) Policy #79-ISA-01, Prison Rape Elimination Policy; Policy #79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy; and Policy #03E-01 PCI, Prison Rape Elimination; provide written direction mandating a zero-tolerance policy toward all forms of sexual abuse and sexual harassment. These policies also outline both the agency's and the facility's approach to preventing, detecting, and responding to such conduct.

(B) The agency has employed an agency-wide PREA Coordinator. This position is within the upper hierarchy of organizational authority within the ODRC. The PREA Coordinator's sole responsibility within the agency is to facilitate institutional needs specific to the implementation and advancement of the PREA standards. In doing so, the PREA Coordinator is charged with the direct supervision of one Assistant PREA Coordinator. The PREA Coordinator, in coordination with the Assistant PREA Coordinator and facility wardens, oversee the implementation of PREA standards at the facility level.

(C) The State of Ohio operates 28 penal institutions. Each warden within said institution has been charged with designating a PREA point person, who holds the supervisory rank of Operation Compliance Manager. The PCI Warden affirms the designation of the PCI Operation Compliance Manager to serve in this capacity. The PCI Operation Compliance Manager further confirms both sufficient time and authority to coordinate the facility's efforts in complying with the PREA standards.

Reasoning & Findings Statement:

This standard works to ensure the agency as a whole operates with a zero-tolerance acceptance level of sexual abuse and sexual harassment of incarcerated persons. As well, the standard requires that individual facilities operate with respect to the agency's zero-tolerance expectation. In this regard, the agency has implemented policies designed to prevent, detect, and respond to sexual abuse and sexual harassment. In addition to the overall agency policy, each facility, to include PCI, has further developed its own coordinated response plan to effectively apply the agency's broad policy to the uniqueness of their individual units. Such forethought ensures that every facet of the agency's policy is included in the standard operating procedures unique to every institution. Additionally, though the standard requires the minimum staffing of one agency-wide PREA Coordinator with individual PREA Compliance Managers assigned to each facility, the State of Ohio has exceeded this requirement

	<p>through the additional employment of an Assistant PREA Coordinator. The sole function of this assistant position is to better coordinate and advance the implementation of the PREA standards and policies so as to significantly increase the sexual safety of all incarcerated persons within the ODRC. As such, both the agency and the facility has clearly exceeded the basic requirements of this standard.</p>
--	--

**115.12 Contracting with other entities for the confinement of inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- Statement of Fact, PREA Coordinator, 1-3-22
- ODRC Mandatory Use Contract For: Operation, Management, and Purchase of Correctional Facilities, 6-30-32

Interviews:

- Agency Contract Administrator
- Agency PREA Coordinator

Site Review Observations:

- The PCI is a publicly operated correctional facility through the Ohio Department of Rehabilitation and Correction (ODRC).

Standard Subsections:

(A) The ODRC contracts for the confinement of its inmates with two private agencies; namely, CoreCivic, as well as Management and Training Corporation. The current contracts governing these relationships contain explicit language directing said agencies to adopt and comply with the Prison Rape Elimination Act, National Standards to Prevent, Detect, and Respond to Prison Rape (28 C.F.R. Part 115).

(B) These contracts also contain language requiring that the ODRC monitors PREA compliance of all contracted facilities, as well as provide relevant training on their responsibilities under ODRC's policy on prevention, detection, and response to sexual

abuse and sexual harassment. As evidenced by the ODRC's PREA Audit Schedule, all ODRC facilities, either privately or publicly owned, are routinely audited for their compliance with the PREA standards.

Reasoning & Findings Statement:

This standard ensures that all private entities contractually bound to the parent agency; namely, the Ohio Department of Rehabilitation and Correction, complies with the PREA standards. In this, prior to engaging any contractual relationship with a private agency, the ODRC ensures that all private agencies understand that it is the private agencies' absolute responsibility to comply with PREA regulations. Furthermore, once contracted with the ODRC, private agencies understand their continuing duty to remain in compliance with PREA standards. To assist in their compliance with ODRC regulations, to include PREA policies, all privately operated facilities are assigned an ODRC liaison. Lastly, private facilities are routinely audited on a rotating basis to encourage said compliance. Hence, the agency meets the established requirements under this standard.

**115.13 Supervision and monitoring**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

## Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 50-PAM-02, Inmate Communication/Weekly Rounds, 10-7-19
- 10-SAF-22, Body Worn Camera, 12-23-21
- PCI PREA Staffing Plan, 11-10-21
- PCI Shift Assignment Roster, First, 7-6-22
- PCI Shift Assignment Roster, Second, 7-6-22
- PCI Shift Assignment Roster, Third, 7-6-22
- PCI List of Areas and Cameras, 2021

## Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Agency PREA Coordinator
- Intermediate or Higher-Level Facility Staff
- Random Staff

## Site Review Observations:

- All inmate housing areas contain at least one security staff post that is continuously monitored by staff. All areas of high offender traffic are assigned permanent staffing positions while in operation.
- During the site review, supervisory staff were observed making routine and frequent rounds throughout the facility. All of the random staff interviewed did

indicate that supervisory staff were available to them as needed and did routinely conduct unannounced rounds within the facility.

- During supervisory rounds, ranking officials were routinely observed reviewing required documentation completed by line staff as a function of their duty posts.
- During the on-site portion of the audit, current PCI Employee Visit Records (Chronological Housing/Building Logs) were inspected onsite to ensure supervisory staff were conducting, and properly documenting, their unannounced rounds. Supervisory signatures were observed in red ink.
- All uniform staff wear body cameras.

Standard Subsections:

(A) The ODRC, PCI has developed and documented a staffing plan (11-10-21). Facility administrators are required to make their best efforts in complying with said plan on a regular basis to provide for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against abuse (79-ISA-01). As explicitly noted within the Staffing Plan Annual Review template, the staffing plan takes into consideration generally accepted correctional practices when determining staffing needs and the need for video monitoring. If present, the staffing plan considers any judicial, federal investigative agencies, internal, and external oversight bodies' findings of inadequacy. The ODRC Staffing Plan Annual Review template requires that the unit considers components of the facility's physical plant, composition of the inmate population, number and placement of supervisory staff, institutional programming needs, applicable state and local laws, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, as well as any other relevant factors when determining staffing needs and the need for video monitoring. When asked, facility staff consistently remarked that unit administration does consider the nature of the offender population and current issues/trends within the offender population when determining staffing levels. As noted by the PCI Warden, the facility staffing plan was predicated consistent with average daily number of inmates assigned to the PCI, as well as the nature of the inmate population.

(B) ODRC policy governs the minimum use of employee staffing (79-ISA-01). If unit staffing levels fall below these minimum requirements, ODRC policy further requires that facility staff properly document each occurrence. As noted by the PCI Operation Compliance Manager, within the past 12 months, the staffing levels of PCI have not fallen below the required levels.

(C) The facility conducts an annual review of its staffing plan, with the last review

being finalized as of November 10, 2021. As evidenced via interviews with agency and facility staff, in completing the PCI staffing plan review, the facility did coordinate with the agency PREA Coordinator, as well as the PCI Operation Compliance Manager, to develop the facility staffing plan in accordance with the aforementioned 115.13(a). PREA staffing members were consulted regarding the use of resources necessary to commit to the staffing plan, as well as the use of video monitoring technologies within the facility. The PCI also utilizes body cameras worn by all uniformed staff.

(D) The agency does have a policy in place to mandate unannounced rounds conducted by intermediate-level or higher-level supervisors (50-PAM-02). This policy does require that staff document those rounds. The policy requires unannounced rounds to be made on all shifts, both day and night hours. The agency also prohibits staff from alerting others that said rounds are being conducted. The timing of the site reviewed allowed the auditor to observe the facility while employees from all three shifts were on duty. The auditor did observe line and supervisory staff document said rounds as appropriate. While conducting the site review, the auditor also reviewed numerous Employee Visit Logs throughout the facility. Said documentation did reflect that not only were supervisory staff conducting unannounced rounds as required, but these rounds were also clearly documented using red ink. When interviewed, supervisory staff stated that they performed unannounced rounds at various times, as well as walked varying paces and routes when conducting unannounced rounds to make their presence less predictable. When interviewing random staff, all persons stated that supervisors routinely conduct unannounced rounds. Staff also noted that it was a violation of policy for supervisors to announce their rounds or for other staff to call ahead and warn their co-workers that a supervisor was conducting security rounds. When interviewing random offenders, most inmates stated that they have routinely witnessed supervisory staff conducting rounds throughout the facility. During the site review, it was further noted that both staff and offenders seemed comfortable with the presence of supervisory staff within inmate housing areas; thus, further supporting that said staff are routinely present in inmate housing areas.

#### Reasoning & Findings Statement:

This standard requires the facility to ensure adequate staffing levels that promote the safety of not only all inmates assigned to the facility, but also to ensure the safety of all correctional employees, volunteers, and contractors within the institution. During the past 12 months, the PCI did not deviate from its staffing plan. To ensure that the sexual safety of inmates assigned to the PCI is given sufficient weight in determining facility staffing needs, the PCI staffing plan is reviewed annually in coordination with all PCI PREA staffing components. While the facility itself contains over 300 video cameras throughout institutional grounds, uniform officers also wear body cameras attached to their uniform shirts. Lastly, to ensure meaningful and effective correctional supervision, PCI supervisors routinely conduct and document

	<p>unannounced rounds. The auditor observed, as well as the facility provided, evidence of documented unannounced rounds of supervisory ranks of various levels, up to and including, the facility warden. As such, the PCI facility has exceeded compliance with this provision.</p>
--	---

**115.14 Youthful inmates**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 52-RCP-01, Reception Admission Procedures, 9-14-20
- 71-SOC-05, Youthful Inmate Program Management, 9-25-17

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Random Staff
- Random/Targeted Offenders

Site Review Observations:

- While conducting the on-site review, the auditor did not observe any incarcerated individuals who appeared excessively youthful.
- In reviewing inmate documents, the auditor did not observe any inmate birthdays to be less than 18 years younger than the date of the on-site review.
- All inmates interviewed stated that they were at least 18 years of age and/or did not have any knowledge of any inmates assigned to the PCI who were not at least 18 years of age.

Standard Subsections:

(A) The ODRC policy (52-RCP-01) prohibits the placement of any inmate less than 18 years of age in a housing unit within sight or sound of any adult inmates. As well, youthful inmates may not have any physical contact through the use of a shared dayroom or other common space, shower area, or sleeping quarters, with any adult inmate. The ODRC policy (71-SOC-05) further requires that should youthful inmates be within sight or sound of adult inmates, or be able to have physical contact with adult inmates, staff must maintain direct supervision over youthful inmates.

(B) As PCI does not house any inmates less than the age of 18 years, the facility has most certainly maintained absolute sight and sound separation between youthful offenders and adult inmates.

(C) As PCI does not house any offender less than 18 years of age, its unit administration has absolutely avoided placing any adolescent offender in isolation in order prevent said offender from living within sight and sound of adult offenders. Hence, the PCI has not denied any adolescent offender the ability to engage in daily large-muscle exercise or to participate in other program or work opportunities.

Reasoning & Findings Statement:

This standard requires that the agency ensures sight and sound separation between youthful offenders and adult inmates. Alternatively, the standard requires that there is direct staff supervision when youthful offenders and adult inmates have the possibility of sight, sound, or physical contact. The State of Ohio prohibits the assignment of youthful offenders to adult housing units. Hence, as PCI contains only adult housing units, PCI is prohibited from receiving, and subsequently housing, youthful offenders. As such, the facility maintains an absolute and constant sight, sound, and physical barrier between youthful offenders and incarcerated adults. As such, the PCI has exceeded the requirements of this standard.

**115.15 Limits to cross-gender viewing and searches**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

## Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-05, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy, 7-9-18
- 310-SEC-01, Incarcerated Individual and Physical Plant Searches, 9-14-20
- 10-SAF-22, Body Worn Camera, 12-23-21
- ODRC PREA Pat Down Video Script
- PCI Employee PREA Training, FY22
- PCI List of Areas and Cameras, 2021

## Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Offenders Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Random Offenders

## Site Review Observations:

- During the site review, staff were routinely observed making cross-gender announcements when persons of the opposite gender entered offender housing areas.
- PCI has an opposite gender annunciator installed in all inmate housing areas. When activated, the annunciator, with consideration for ADA limited inmates, emits a

very loud audible alarm, as well as flashing yellow lights, to indicate that opposite gender staff are entering the housing unit.

- Supervisory staff were observed conducting their routine security checks within inmate housing areas. Cross-gender announcements and supervisory rounds, both unannounced rounds and scheduled rounds, were subsequently documented on the buildings' chronical activity logs.
- Privacy shields were in place inhibiting view into all inmate toilets.
- Privacy shields were in place and/or available in medical examination rooms.
- Privacy curtains were noted in all shower areas.
- Video surveillance was not trained to areas where inmates might routinely be in a state of undress.

Standard Subsections:

(A) ODRC Policy (79-ISA-01) prohibits cross-gender strip or visual body cavity search of inmates except in exigent circumstances or by medical practitioners. Random staff interviews confirm that staff do not engage in such activities. Policy requires (10-SAF-22) that staff have body cameras disengaged when conducting routine strip searches. Random staff interviews confirm adherence to said policy. All inmates interviewed noted that they had not been, nor had they witnessed any other inmate being, stripped or body cavity searched by a security staff member of the opposite gender.

(B) The PCI is a male facility. As there are no biological females incarcerated at this facility, security staff always follow policy (310-SEC-01) in refraining from conducting cross-gender pat-down searches of female inmates, even in exigent circumstances. As well, the facility has never denied any female inmate access to a regularly available program or out of cell activity.

(C) Agency policy (310-SEC-01) requires that all cross-gender strip and visual body cavity searches are documented. The facility has not engaged in any cross-gender strip searches or cross-gender body cavity searches of its male prisoners within the audit period. However, under exigent circumstances, should the need arise, all random staff interviewed understood that such action, while extremely unlikely, would require extensive justification. As the PCI does not house female inmates, no female inmates have ever been subject to a cross-gender search.

(D) The PCI does have a policy (79-ISA-01) in place that allows inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their buttocks or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The facility does follow policy (79-ISA-01) requiring that staff of the opposite gender announce their presence when entering an inmate housing unit. In speaking with agency staff, all staff members were aware of the agency's prohibition against cross-gender strip and visual body cavity searches. Policy 79-ISA-01, Prison Rape Elimination, requires all persons of the opposite gender to announce their presence upon entering an opposite gender housing assignment. For opposite gender announcements, the PCI has an opposite gender annunciator installed in all inmate housing areas. When activated, the annunciator, with consideration for ADA limited inmates, emits a very loud audible alarm, as well as flashing yellow lights, to indicate that opposite gender staff are entering the housing unit. All female staff interviewed did confirm their adherence to said policy, as well as their use of the annunciator system. As well, the majority of inmates interviewed confirmed this statement. During the facility site review, modesty barriers and curtains were in place to inhibit the viewing of any inmate in a state of undress. Lastly, a review of the facility's video surveillance found that cameras were not trained to areas where inmates might routinely be in a state of undress.

(E) ODRC policy (79-ISA-05) prohibits searching transgender or intersex inmates for the sole purpose of determining the inmates' genital status. In interviewing staff, it was clearly expressed that if the gender of an offender is unknown, conducting a strip search to determine the gender of the inmate would be inappropriate. It was generally expressed that to determine gender, staff would contact the medical department, their supervisor, or simply ask the inmate.

(F) Records reflect that 100% of PCI security staff have been trained on proper policy specific to conducting cross-gender inmate pat searches and transgender pat searches in a professional and least intrusive manner as possible consistent with security needs. All random staff interviewed did affirm their understanding of agency policy prohibiting the search of any transgender or intersex inmate for the sole purpose of determining the inmate's genital status. ODRC Policy 79-ISA-05 specifies that "staff shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it may be determined during the conversations with the inmate or by reviewing medical records. If staff members are unable to determine the inmate's genital status, the inmate may be referred to medical for a broader medical examination conducted in private by a medical practitioner." Policy (310-SEC-01) provides clear instructions on how staff will perform searches of any inmate, to include transgender inmates. Random security staff interviewed confirmed their understanding of how to conduct a proper search of transgender/intersex inmates assigned to the PCI. As well, facility training rosters reflect that all correctional staff

assigned to the PCI have been trained on how to conduct searches in a professional and least intrusive manner as possible.

Reasoning & Findings Statement:

This standard requires that the agency place limits on cross-gender strip or cavity searches. The ODRC has enacted policies prohibiting said searches in the absence of exigent circumstances. In the event exigent circumstances require cross-gender strip or cavity searches, policy subsequently requires this search to be properly documented. Agency security staff are trained on the proper procedures to conduct pat searches on transgender or intersex inmates, which require said searches to be performed in a professional and least intrusive manner as possible. An extensive review of live video surveillance reflects cameras are not trained in areas where inmates would routinely be in a state of undress. Agency policy regarding body-worn cameras requires that said cameras are generally disengaged when conducting an inmate strip search. As well, the agency requires opposite gender staff to announce their presence upon entering inmate housing areas where persons may be in a state of undress. For opposite gender announcements, the PCI has an opposite gender annunciator installed in all inmate housing areas. When activated, the annunciator, with consideration for ADA limited inmates, emits a very loud audible alarm, as well as flashing yellow lights, to indicate that opposite gender staff are entering the housing unit. During the on-site portion of the audit process, this announcement was routinely observed as opposite gender staff entered inmate housing areas.

<b>115.16</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>
---------------	---

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 64-DCM-02, Inmates with Disabilities, 3-5-18
- 52-RCP-01, Reception Admission Procedures, 9-14-20
- ODRC PREA Zero Tolerance PowerPoint Training Lesson Plan w/ Test
- ODRC Inmate Handbook, Appendix A, 52-RCP-10, PREA Information
- ODRC Mandatory Use Contract For: Translation and Interpretation Service, 12-31-22

Interviews:

- Agency Head
- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Random Staff
- Offenders with Disabilities
- Offenders with Limited English Proficiency

Site Review Observations:

- Correctional staff assigned to housing areas entered each area within the building do loudly announce inmate information, to include when female staff entered

the housing area.

- Handicap accommodations were easily recognizable and accessible throughout the facility.
- Viewed ODRC Inmate PREA Educational Video with Director Chambers Smith
- PREA Notices, as well as other advisement notices, were posted in languages spoken by significant portions of the offender population; namely English and Spanish.
- PREA information is also available in large print
- Vocalink Language Services are available for staff to communicate with offenders who do not speak English.
- Staff translators are also available if needed.

Standard Subsections:

(A) The ODRC has developed agency-wide policies (64-DCM-02, 79 ISA-01, 52-RCP-10) to enhance communication efforts with disabled inmates; such as those with hearing, vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities, or those with limited English proficiency; so as to provide said inmates with 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. PREA educational information is provided in writing, verbally, as well as presented in video format (available in English and Spanish). The video format includes both a deaf interpreter and closed caption. The PCI maintains a mandatory for use contract for translation and interpretation services to assist inmates who do not speak a language common to PCI staff. In this, the Vocalink Language Services can be used to translate PREA, as well other confidential information.

When interviewing staff, employees were aware of the need to obtain staff interpreters for sensitive security matters, such as PREA related investigations. All staff were aware that other inmates could not be used to translate for any inmate during a sexual abuse/harassment investigation or incident. During the audit time frame, there have been no instances of PCI using inmate interpreters for PREA related matters. Inmates with physical and/or intellectual disabilities were interviewed. These inmates all stated that their disabilities did not prevent them from participating in any facility-based services or that ODRC has made accommodations for their disabilities, to include the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

(B) The PREA informational brochure is printed in two different languages: English and Spanish. As well, per the PREA Coordinator, the PREA Informational video can be seen by inmates in those languages, along with being illustrated via closed captioning and deaf interpreter. As needed, Vocalink Language Services can also be used to translate PREA information into other languages.

(C) The ODRC has developed agency-wide policies that prohibit the use of inmate interpreters or other types of offender-based assistance in the transmission or subsequent investigation of security sensitive information, such as PREA related matters (64-DCM-02, 79-ISA-01). PREA related matters. The agency has also developed agency-wide policies to enhance communication efforts with disabled offenders; such as those with hearing, vision, speech, or other physical disabilities; psychiatric or other intellectual disabilities, or those with limited English proficiency (64-DCM-02); so as to provide said offenders with an equal opportunity to directly participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment without the use of inmate interpreters or other types of inmate-based assistance. PCI staff are aware of these agency policies and do not utilize inmate interpreters for security sensitive matters.

#### Reasoning & Findings Statement:

This standard empowers all inmates with the ability to redress government in light of claims of sexual abuse and sexual harassment. An essential component to that requirement is the ability to access PREA information, services, and support services. Inmates with disabilities; either cognitive, physical, or cultural, may require additional assistance in achieving said access. Hence, it is necessary for the agency to provide additional measures to ensure said inmates have equal access. The ODRC recognizes this need and has created policies to address it. Furthermore, the agency has taken steps to ensure that the inmate population is aware of translation services via a posted notice within the Inmate Handbook. The PCI maintains sufficient stocks of PREA informational brochures in both English and Spanish. The PCI routinely stocks PREA informational brochures, as well as shows PREA informational videos in English, as well as Spanish, the most commonly spoken language inside of PCI outside of English. Additionally, the PCI offers a listing of other types of resources available to inmates, as well as contact information for those resources, in both English and Spanish. Lastly, it should be noted that at no time during the past 12 months, has PCI used inmate interpreters to help agency staff communicate with other inmates regarding security sensitive information. Rather, when needed, staff commonly use staff interpreters or a language assistance phone line for communication with inmates who have limited English proficiency.

**115.17 Hiring and promotion decisions**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 34-PRO-07, Background Investigations, 9-1-21
- 31-SEM-02, Standards of Employee Conduct, 9-3-19
- PCI Personnel Actions Request, Promotion, 5-31-22
- PCI Consent to Promotion, 5-26-22
- PCI Authority for Release of Information, 5-6-22
- PCI Background Investigation Checklist, 5-31-22
- PCI Required Criminal History and PREA Interview Questions, 5-6-22
- PCI Applied for Job, 4-25-22
- PCI Personnel Actions Request, Hire, 6-17-22
- PCI Background Investigation Checklist, 6-8-22
- PCI Authority for Release of Information, 5-19-22
- PCI Required Criminal History and PREA Interview Questions, 5-19-22
- PCI Applied for Job, 3-28-22
- PCI Background Investigation Checklist, 4-29-22
- PCI PREA Background Check Authorization, 4-27-22
- PCI New Contractor Tracking, PREA Training, FY 23
- PCI Background Investigation Checklist, 8-2-22
- PCI PREA Background Check Authorization, 8-1-22
- PCI Staff Background Tracking, FY23

Interviews:

- Administrative (Human Resources) Staff
- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager

Site Review Observations:

- Review of three (3) additional employee files onsite for required PREA/criminal background documentation
- Review of PCI employee PREA training tracking spreadsheet

Standard Subsections:

(A) The ODRC has developed agency-wide policies (31-SEM-02, 34-PRO-07, 79-ISA-01) that prohibit the hiring or promotion of employees and contracted workers who have engaged in sexual abuse, been convicted of engaging or attempting to engage in a sexual activity with inmates, or have been civilly or administratively adjudicated to have engaged in a sexual activity with offenders while in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. The agency also has policies that stipulate prior to all hiring and promotional decisions of employees and contract workers, any incidents of sexual harassment will be considered. Prior to hiring any new employee or contract worker at the facility level, ODRC Human Resource staff ensure that criminal background checks have been conducted on the prospective employee. As well, as required by policy, ODRC/PCI Human Resource staff ensure that all previous institutions of employment are contacted to determine if candidates have any previously substantiated claims of sexual abuse or resigned during a pending investigation of such claims. Conversely, policy also requires that the PCI cooperates with other correctional and law enforcement agencies to ensure that accurate information regarding PREA related employment laws are effectively shared between agencies.

(B) ODRC policy (34-PRO-07) requires the facility to consider any incidents of sexual harassment in determining whether to hire/promote anyone who may have contact with inmates. Likewise, in speaking with the ODRC Human Resource representative, agency policy requires Human Resource staff to also verify contractor employment

history.

(C) Before hiring or promoting employees, policy (34-PRO-07, 79-ISA-01) requires the agency to perform criminal background checks. Policy (34-PRO-07) also requires the agency to conduct checks with prior employers for any applicant previously employed by a correctional facility.

(D) Agency policy requires that prior to enlisting the services of any contractors who may have contact with offenders, the agency performs criminal background records checks on said contractors. An examination of PCI's current contractor background spreadsheet reflects that all persons contracted with the PCI received an initial background check, as well as, where applicable, required subsequent checks within the required time frame.

(E) Once employed, agency policy (34-PRO-07, 79-ISA-01) requires that criminal background checks are conducted every five years to ensure that said persons have not been found to have engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. As well, employees have an affirmative duty to report any contact they may have had with other law enforcement agencies and to report any sexual misconduct they may have been found guilty of at any other institution (31-SEM-02). Furthermore, employees are made aware that failing to provide this information, or providing false information regarding sexual misconduct, is grounds for employee discipline, to include termination of employment (31-SEM-02). A review of PCI's current employee background spreadsheet reflects that all persons working at the PCI have received their initial criminal background check, as well as, where applicable, required subsequent checks within the required time frame.

(F) All applicants, as well as current employees, are required to submit a Personal History Questionnaire form (79-ISA-01). This document directly asks employees who may have contact with inmates to disclose any previous sexual misconduct that may have occurred in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution. Additionally, the ODRC does impose a continuing affirmative duty on all employees to disclose any misconduct found within Section A of this standard (31-SEM-02). Review of documentation specific to PCI confirms the facility's adherence to said policies.

(G) Agency policy expressly advises employees that material omissions or providing false information regarding the aforementioned misconduct is grounds for termination.

(H) Agency policy allows that unless prohibited by law, the ODRC shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied (34-PRO-07).

Reasoning & Findings Statement:

This standard requires the agency to consider the sexual safety of inmates in all hiring and promotion decisions within the agency. A review of PCI hiring and promotion files supports adherence to that process. The agency has numerous policies in place to ensure that end. As well, the PCI Human Resource Department has developed standardized tracking methods to ensure timely reviews, and subsequent reviews, of applicants and continuing employees\contractors are conducted as required. Review of employee and contractor training files reflect that the PCI Human Resource Department complies with agency policy. As such, the PCI clearly meets the requirements of this standard.

**115.18 Upgrades to facilities and technologies**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 10-SAF-22, Body Worn Camera, 12-23-21
- PCI PREA Staffing Plan, 11-10-21
- PCI List of Areas and Cameras, 2021

Interviews:

- Agency Head
- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager

Site Review Observations:

- Observed video monitoring technologies present within the facility.
- Reviewed live video surveillance across the facility.
- Observed body worn cameras on uniform correctional staff

Standard Subsections:

(A) Per the PCI Warden, the PCI has not designed or constructed any substantial modifications of the existing facility since the last PREA audit.

(B) The PCI has updated the video monitoring system or other monitoring technology since the last PREA audit, specifically through the use of body worn cameras by uniform correctional staff. Within the past year, the facility has also installed numerous additional cameras to address areas of lesser visibility.

Reasoning & Findings Statement:

Within the audit time frame, PCI has not designed or constructed any substantial modification of the existing facility. As a function of its annual staffing review, the PCI does consider, among other factors, generally accepted correctional practices and the use of video monitoring technologies. Within the past year, the facility has installed numerous additional cameras to address areas of lesser visibility. Currently, the PCI has over 300 cameras that provide coverage throughout the institution. In addition, uniform correctional staff are also required to utilize body worn cameras during their interactions with inmates as appropriate per policy. As appropriate, these devices are terminated to ensure proper modesty levels when staff are supervising inmates who might be in a state of undress, such as during search procedures. Otherwise, these devices can provide for the awareness of actions by correctional staff, as well as events occurring within their environments. In all staffing decisions, as well as decisions involving the use of video monitoring technology, to include the use of individualized body worn cameras by correctional staff, the PCI has certainly sought to maximize the facility's ability to protect inmates from sexual abuse. As such, the agency, as well as the facility, have exceeded in this requirement.

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• 68-MED-15, Bureau of Medical Services Co-Payment Procedures, 9-10-18</li> <li>• B-11, Medical Care Guidelines for Sexual Contact or Recent Sexual Abuse, 9-28-15</li> <li>• ODRC Memo, PREA Coordinator, Availability of forensic medical examinations</li> <li>• ODRC MOU with OSU, 6-23-21</li> <li>• ODRC MOU with OSHP &amp; ODYS, 10-8-21</li> <li>• ODRC PREA Victim Support Persons Training Lesson Plan, 1-18-18</li> <li>• PCI Emergency Department Encounter, 5-1-22</li> <li>• PCI MOU with Sexual Assault Response Network of Central Ohio (SARNCO), 12-31-19</li> <li>• PCI PREA Victim Support Meme, 1-24-22</li> <li>• PCI Victim Support Person Activity Report, 10-25-19</li> <li>• PCI Victim Support Person Activity Report, 8-31-21a</li> <li>• PCI Victim Support Person Activity Report, 8-31-21b</li> <li>• PCI PREA Victim Support Person Training, 10-13-13</li> <li>• PCI PREA Victim Support Person Training, 12-3-13a</li> <li>• PCI PREA Victim Support Person Training, 12-3-13b</li> <li>• PCI PREA Victim Support Person Training, 12-5-13a</li> <li>• PCI PREA Victim Support Person Training, 12-5-13b</li> <li>• PCI PREA Victim Support Person Training, 7-18-14</li> <li>• PCI PREA Victim Support Person Training, 8-21-15a</li> </ul>

- PCI PREA Victim Support Person Training, 8-21-15b
- PCI PREA Victim Support Person Training, 1-17-17a
- PCI PREA Victim Support Person Training, 1-17-17b
- PCI PREA Victim Support Person Training, 1-17-17c
- PCI PREA Victim Support Person Training, 1-17-17d
- PCI PREA Victim Support Person Training, 2-9-18a
- PCI PREA Victim Support Person Training, 2-9-18b
- PCI PREA Victim Support Person Training, 2-9-18c
- PCI PREA Victim Support Person Training, 2-9-18d
- PCI PREA Victim Support Person Training, 2-9-18e
- PCI PREA Victim Support Person Training, 2-9-18f
- PCI PREA Victim Support Person Training, 2-9-18g
- PCI PREA Victim Support Person Training, 8-31-21
- PCI Sexual Abuse First Responder Checklist, 5-1-22
- PCI Victim Support Person Activity Report, 5-1-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Random Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Ohio State University Medical Center
- Community-Based Victim Advocacy Staff
- Offenders Who Reported Sexual Abuse

Site Review Observations:

- Observed Medical Department and privacy screens/limitations

Standard Subsections:

(A) Agency policy (79-ISA-02) mandates that the Ohio State Highway Patrol (OSHP) is responsible for investigating criminal allegations of sexual abuse. In this, policy asks that the OSHP follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative procedures and criminal prosecutions.

(B) As the PCI does not house youth, it is not necessary to utilize a developmentally appropriate youth protocol. PCI policy does, however, still require the agency to utilize the U.S. Department of Justice's Office on Violence Against Women protocol; namely, A National Protocol for Sexual Assault Medical Forensic Examination, Adults/ Adolescents as the evidence collection protocol manual (79-ISA-02).

(C) In accordance with agency protocol, the PCI does ensure that all offenders are given access to forensic medical examinations without cost (68-MED-15). These exams are performed at an outside facility by qualified SAFE/SANE nursing staff. As SAFE/SANE staff are either on duty or on call 24 hours a day, seven days a week, the examination will always be performed by a qualified medical practitioner. The facility utilizes Ohio State University Medical Center for forensic exams. In the past 12 months, the PCI has facilitated two (2) such exams.

(D) The agency does attempt to make a victim's advocate available for offender support. In this, policy (79-ISA-02) requires that upon notification of an allegation of abuse, the institution Victim Support Person (VSP) shall meet with the victim. Review of agency documentation reflects ample VSPs are assigned to the PCI and available as needed. Policy also allows for the use of local advocates as available from the local rape crisis center. The facility utilizes the Sexual Assault Response Network of Central Ohio (SARNCO) as a local rape crisis center.

(E) In accordance with policy (79-ISA-02), and as requested by the victim, the VSP or

local rape crisis center advocate may remain with the inmate through the forensic medical examination process and investigatory interviews. As requested, this person may provide emotional support, crisis intervention, information, and referrals. During the course of staff interviews, VSPs were able to provide more specific insight into their roles and responsibilities as a victim advocate.

(F) Agency policy (79-ISA-02) mandates that the Ohio State Highway Patrol (OSHP) is responsible for investigating criminal allegations of sexual abuse. To this effect, ODRC policy does ask that OSHP utilize the U.S. Department of Justice's Office on Violence Against Women protocol; namely, A National Protocol for Sexual Assault Medical Forensic Examination, Adults/Adolescents as the evidence collection protocol manual.

(G) The auditor is not required to audit this provision.

(H) Only qualified staff members may serve as VSPs. All such staff have been appropriately screened and trained for that purpose. Through memorandums of understanding with the local rape crisis centers, Sexual Assault Response Network of Central Ohio, the agency has ensured that all persons who have contact with PCI inmates have been appropriately screened and trained, as well as received education concerning sexual assault and forensic examination issues in general.

Reasoning & Findings Statement:

This standard concerns evidence protocol and forensic medical examinations. The PCI has policies in place to ensure proper accountability during evidence collection and the forensic exam process. During the past 12 months, the PCI has initiated the evidence protocol and forensic medical examination process twice. As evidenced during the interview process, facility staff are very much aware of the policies and have standard practices in place to ensure the proper flow of the evidence collection process. The PCI has trained staff who can service as Victim Support Persons during the forensic evidence collection process. As well, a MOU is in force between the PCI and the Sexual Assault Response Network of Central Ohio to ensure that inmates are afforded access to a local victim's advocate following forensic exams. As such, the PCI has met the requirements of this standard.

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="256 188 983 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 300"><b>Auditor Discussion</b></p> <hr/> <p data-bbox="256 340 429 376">Documents:</p> <ul data-bbox="256 483 1442 1070" style="list-style-type: none"> <li data-bbox="256 483 1070 519">· 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li data-bbox="256 555 1442 631">• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li data-bbox="256 667 1086 703">• ODRC Statement of Facts, PREA Coordinator, 1-3-22</li> <li data-bbox="256 739 1294 775">• ODRC Investigator Protocol, Appendix A, OSHP evidence collection</li> <li data-bbox="256 810 1150 846">• Ohio Administrative Code, Rule (AR) 5120-9-24, 5-23-14</li> <li data-bbox="256 882 1347 958">• PCI PREA Incident Report Application with all related and investigative documents, 5-1-22</li> <li data-bbox="256 994 1406 1070">• PCI OCM Memo, No Allegations of Sexual Harassment During Audit Period, 7-21-22</li> </ul> <p data-bbox="256 1182 416 1218">Interviews:</p> <ul data-bbox="256 1326 1326 2007" style="list-style-type: none"> <li data-bbox="256 1326 544 1361">• Agency Head</li> <li data-bbox="256 1397 719 1433">• Agency PREA Coordinator</li> <li data-bbox="256 1469 624 1505">• PCI Facility Warden</li> <li data-bbox="256 1541 858 1576">• PCI Operation Compliance Manager</li> <li data-bbox="256 1612 616 1648">• Investigative Staff</li> <li data-bbox="256 1684 544 1720">• Medical Staff</li> <li data-bbox="256 1756 632 1792">• Mental Health Staff</li> <li data-bbox="256 1827 1326 1863">• SAFE and/or SANE Personnel of Ohio State University Medical Center</li> <li data-bbox="256 1899 935 1935">• Community-Based Victim Advocacy Staff</li> <li data-bbox="256 1971 903 2007">• Offenders Who Reported Sexual Abuse</li> </ul>

Site Review Observations:

- Observed Medical Department and privacy screens/limitations

Standard Subsections:

(A) Policy (79-ISA-02, AR 5120-9-24, ODRC Investigator Evidence Protocol, OSHP 103.07) requires that administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. Within the last 12 months, the PCI has received five (5) sexual abuse and no (0) sexual harassment allegations.

(B) The ODRC refers all allegations of sexual abuse and sexual harassment to the OSHP, an external law enforcement agency with legal authority to conduct criminal investigations. The ODRC has published this policy, as well as the criminal investigation process, on the agency website. All referrals to the OSHP are documented by the agency.

(C) In accordance with 79-ISA-02, "the agency PREA Coordinator/designee shall maintain a document that describes the responsibilities of the ODRC and the OSHP for criminal investigation." Those responsibilities are then listed in detail in Appendix A of that same policy.

(D) The auditor is not required to audit this provision.

(E) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard ensures that proper referrals of allegations are made for further investigations by an agency with proper authority to conduct criminal investigations. The ODRC does have appropriate policies in place mandating referrals in specific instances. Within the past 12 months, the PCI has referred all required allegations of sexual abuse that it has received to the OSHP. In interviewing PCI investigative staff, it is clear that PCI staff refer all required investigations to OSHP for further processing in accordance with policy. As such, the PCI complies in all material ways with this

	standard for the relevant review period.
--	--

<b>115.31</b>	<b>Employee training</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 266 557 300"><b>Auditor Discussion</b></p> <hr/> <p data-bbox="256 344 429 378">Documents:</p> <ul data-bbox="256 490 1445 1032" style="list-style-type: none"> <li data-bbox="256 490 1078 524">• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li data-bbox="256 562 1054 595">• 39-TRN-10, Employee Orientation Training, 3-1-21</li> <li data-bbox="256 633 1302 667">• ODRC PREA Zero Tolerance PowerPoint Training Lesson Plan w/ Test</li> <li data-bbox="256 705 1445 781">• ODRC Appropriate Communication with LGBTI Offenders Training Lesson Plan w/ Test</li> <li data-bbox="256 819 1382 893">• ODRC Appropriate Supervision of the LGBTI and Sex Offender Population Lesson Plan, 8-5-14</li> <li data-bbox="256 931 791 965">• PCI PREA Training Roster, FY22</li> <li data-bbox="256 1003 1302 1037">• PCI Institutional Transfer, Orientation/OJT Program Checklist, 6-8-22</li> </ul> <p data-bbox="256 1149 416 1182">Interviews:</p> <ul data-bbox="256 1294 919 1682" style="list-style-type: none"> <li data-bbox="256 1294 616 1328">• PCI Facility Warden</li> <li data-bbox="256 1366 847 1400">• PCI Operation Compliance Manager</li> <li data-bbox="256 1438 919 1471">• Administrative (Human Resources) Staff</li> <li data-bbox="256 1509 536 1543">• Medical Staff</li> <li data-bbox="256 1581 632 1615">• Mental Health Staff</li> <li data-bbox="256 1653 552 1686">• Random Staff</li> </ul> <p data-bbox="256 1798 624 1832">Site Review Observations:</p> <ul data-bbox="256 1944 1469 2051" style="list-style-type: none"> <li data-bbox="256 1944 1469 2051">• Random review of four (4) employee files, as well as matched review of employee files to employees interviewed, to confirm documentation of required PREA training</li> </ul>

Standard Subsections:

(A) Policy (79-ISA-01, 39-TRN-10) requires all employees to be fully trained on the agency's zero-tolerance policy for sexual abuse and sexual harassment. As verified by Human Resource staff, such training is initially performed as a function of the hiring process. This Sexual Abuse Prevention and Response training is a comprehensive analysis of state laws and PREA standards. A review of training curriculum for this class reflects the agency's zero-tolerance policy for sexual abuse and sexual harassment, and discussion on how employees may fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures. Employees are also informed that offenders have a right to be free from sexual abuse and sexual harassment, to be free from retaliation for reporting said abuse and harassment, the dynamics of sexual abuse/harassment, reactions to sexual abuse/harassment, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with offenders, how to comply with relevant mandatory reporting laws specific to reporting abuse to outside authorities, and how to communicate effectively and professionally with inmates; including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates. During random staff interviews, all employees confirmed receipt of said training. A random review of four (4) employee files confirmed receipt of said training for all employee files reviewed.

(B) Training curriculum reviews demonstrate that the material is appropriate for the gender of inmates at the employees' facility. As well, agency policy (39-TRN-10) requires that "Employees who transfer to an institution that houses incarcerated individuals of a different gender shall receive training tailored to that gender of incarcerated individual as part of their orientation training and in accordance with PREA Standard 115.31b."

(C) A review of PCI PREA Training Completion Report reflects that all actively employed staff have received their initial PREA training, as well as continued training as appropriate based on agency policy (39-TRN-01, 79-ISA-01). Following this initial training, subsequent refresher trainings are provided to staff at mandatory time intervals; specifically, their annual In-Service Training. A review of the PCI PREA Training Completion Report reflects continuing training schedules have all been maintained.

(D) All training is electronically verified and documented upon completion of the

ODRC PREA online training curriculum.

Reasoning & Findings Statement:

This standard relates to employee training. In this, agency staff are required to receive initial PREA training prior to beginning their employment and then refresher training at least every two years. To ensure its compliance with this standard, the ODRC has clearly established training expectations and well-developed training curriculums. PCI maintains compliance with those imperatives. All training is electronically documented upon completion, with PCI maintaining an overall master list of all staff having completed said training. During staff interviews, all employees affirmed their having received significant amounts of training as related to the PREA standards. When asked the series of questions noted within Subsection A of this standard, all staff knew and understood their responsibilities within the agency's zero-tolerance policy. As such, PCI has clearly met the requirements of this provision.

**115.32 Volunteer and contractor training**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- ODRC PREA Contractor/Volunteer Training Script
- PCI Contractor Training Acknowledgement Form, 1-5-22
- PCI Volunteer Training Acknowledgement Form, 10-26-21

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Administrative (Human Resources) Staff
- Medical Staff
- Mental Health Staff
- Contractors Who May Have Contact with Offenders
- Volunteers Who May Have Contact with Offenders

Site Review Observations:

- Review of volunteer and contractor worker standard of conduct training forms.

Standard Subsections:

(A) Policy (79-ISA-01) requires that “all routine volunteers, special event volunteers, Long Term Contractors and Non-Escorted Contractors who have contract with inmates shall be notified of ODRC’s zero-tolerance regarding sexual misconduct and how to report such incidents. All volunteers and contractors shall also be trained on their responsibilities regarding sexual misconduct prevention, detection, and response. The level and type of training shall be based on the services they provide and the level of contact they have with inmates.” At the time of the audit, the PCI has had 344 volunteers and contract workers who could have had contact with offenders. As affirmed by the PCI Operation Compliance Manager, 100% of those persons have received appropriate PREA training, dependent on their level of contact with offenders, prior to their entrance into the facility. Volunteer and contractor files were randomly reviewed for receipt of required training documentation.

(B) As affirmed by the PCI Operation Compliance Manager, all volunteers and contract workers have received PREA training appropriate for their role on the facility. When interviewed, both volunteers and contract workers all stated that they had been made aware of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment. They further stated that if the need arose, they could report an incident of sexual abuse or sexual harassment to their supervisor or a security staff member. Volunteer and contractor files were randomly reviewed for receipt of required training documentation.

(C) Volunteers and contractors are required to receive PREA training prior to working/volunteering within the facility. After receipt of training, contractors and volunteers sign an acknowledgement form indicating the date and that they understood the training that they had received. The facility then maintains a copy of all training files belonging to both volunteers and contractors. When asked, volunteers and contract workers all confirmed that they had received PREA training prior to their actual start date with the agency. Volunteer and contractor files were randomly reviewed for receipt of required training documentation.

Reasoning & Findings Statement:

The agency requires all volunteers and contractors to receive formal training on the agency’s zero-tolerance policy for sexual abuse and sexual harassment. In this, volunteers and contractors must be provided sufficient notice of the agency’s zero-tolerance policy of sexual abuse and sexual harassment. As well, said persons must be informed of how to report any knowledge they may have regarding such abuse. Lastly, the standard requires that the agency maintain appropriate training records to verify that volunteers and contractors understood the training that they had received. As with employee training, the PCI has ensured both volunteers and contractors conducting business on the facility have received and subsequently documented their

	<p>PREA trainings. In speaking with volunteer and contracted personnel, all persons stated that they understood the nature of the PREA and their own roles within it. As well, those interviewed with also able to articulate their responsibilities in reporting acts of sexual abuse and sexual harassment. As such, PCI has demonstrated compliance with the requirements of this standard.</p>
--	--

**115.33 Inmate education**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 52-RCP-10, Inmate Orientation Handbook, English, 1-6-20
- 52-RCP-10, Inmate Orientation Handbook, Spanish, 1-6-20
- 52-RCP-01, Reception Admission Procedures, 9-14-20
- 64-DCM-02, Inmates with Disabilities, 3-5-18
- PREA Inmate Poster – Incidents or Suspicions of Sexual Abuse, Harassment, and Retaliation, English
- PREA Inmate Poster – Incidents or Suspicions of Sexual Abuse, Harassment, and Retaliation, Spanish
- PREA Inmate Poster – Break the Silence, English
- PREA Inmate Poster – Break the Silence, Spanish
- PREA Inmate Poster – Restrictive Housing Inmates, English
- PREA Inmate Poster – Restrictive Housing Inmates, Spanish
- ODRC PREA Inmate Education Video with Director Chambers-Smith
- PCI Incarcerate Individual Transfer Authorization, 5-20-22
- PCI Incarcerated Individual Orientation Acknowledgement Form, 5-25-22

Interviews:

Agency PREA Coordinator

- PCI Operation Compliance Manager
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Inmates

Site Review Observations:

- Observed the inmate reception area.
- Observed PREA Risk Screening process
- Observed PREA informational postings in Offender Housing, Education, Library, Law Library, and other areas of high traffic.
- Observed a variety of PREA related materials and information available for inmate use within the facility libraries and on facility-based inmate computer terminals
- Observed Inmate PREA training video.
- Reviewed four (4) inmate files for documentation of PREA training

Standard Subsections:

(A) Policy (79-ISA-01, 52-RCP-10, 64-DCM-02) requires that upon receipt into the facility, inmates shall receive information in their native language, when possible, explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment. Inmates will also be informed of reporting mechanisms to expose incidents or suspicions of sexual abuse and harassment. Within the past 12 months, the PCI has received 1,071 inmates during the Intake process. Of those offenders, 100% were provided the initial PREA screening and information.

(B) As noted by Intake staff, inmates are immediately provided a summary of the PREA standards upon their initial arrival to the facility. Inmates are then provided a more comprehensive training detailing key points of the process within seven days of intake. Every inmate transferring into PCI, regardless of how long the inmate has been incarcerated within ODRC, will participate in facility orientation, including a comprehensive component on sexual abuse and sexual harassment prevention and response. Of the 1,070 inmates assigned to the PCI for thirty days or more, 100% received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents, as well as on agency policies and procedures for responding to such incidents.

(C) Per the ODRC PREA Coordinator, as of January 2014, all inmates who were incarcerated within the ODRC were required to watch the Inmate PREA training video entitled Prison Rape Elimination Act: Fighting Back Through Awareness. All inmates subsequently received into the ODRC have been required to watch a PREA orientation film during reception. Upon any transfer to another facility within the ODRC, inmates are again required to watch the PREA orientation video as part of the facility orientation program. The ODRC, despite having largely consistent policies across the system, requires that a facility orientation, including a comprehension PREA education, must be provided following each transfer. As noted by the agency's PREA Coordinator, this ensures that each facility can reinforce its role in supporting the agency's zero tolerance policy toward all forms of sexual victimization. During orientation, each facility also provides local information, including identifying its PREA point person. The PCI Operation Compliance Manager confirms that all inmates received at PCI are required, and have watched, the PREA orientation video.

(D) All PREA information is provided in several alternative formats to ensure inmates with disabilities, to include those with limited English proficiency, have equal opportunity to receive, understand, and utilize the PREA process as necessary to promote the sexual safety of all inmates assigned to the ODRC, and more specifically, the PCI. PREA brochures and informational posters are provided in both English and Spanish, the two most common languages spoken within the PCI. The PREA video is available in two languages: English and Spanish. The English version contains a deaf interpreter, closed captioning, and a Spanish translation (spoken with written dialog) of the PREA policy at the end of the video. PREA informational posters are available in large print for the visually impaired. Translation services are available for offenders who don't speak English. As well, per policy (64-DCM-02), the agency will provide reasonable accommodations to all inmates in need of ADA accommodations, both physical and cognitive, so as to ensure said inmates have equal opportunity to benefit from the PREA provisions.

(E) In accordance with policy (79-ISA-01), and confirmed by Intake Staff, at Intake, inmates are provided with a brief PREA overview. Within 7 days of Intake, inmates are then provided with a more comprehensive facility orientation, to include PREA training. The information received is documented on the Inmate Orientation Checklist (DRC 4141 E), which is then acknowledged by signature by both the inmate receiving training and the staff member providing it. During inmate interviews, four (4) of the 41 inmates provided the opportunity to interview stated that they had not received, or did not remember receiving, PREA training. Accordingly, their files were reviewed. At that time, it was noted that all four (4) inmates had, in fact, received PREA training, as well as signed documentation acknowledging this training.

(F) While offenders are provided personal copies of the ODRC Inmate Orientation Handbook (available in English and Spanish) upon receipt into the ODRC system, they

are also loaned an additional copy of the Inmate Orientation Handbook for 14 days following their PCI facility orientation. This material, as well as a wealth of other PREA related information, is continuously available within the facility's Law Library. It is also continuously available via each inmate's tablet and/or computer terminal points located in each housing area. Throughout the facility, as well as posted near all inmate phones, PREA informational posters are displayed in both English and Spanish. There are posters providing the names and contact information for Rape Crisis Centers that provide referrals or recovery support services available to incarcerated inmates. As well, there is information regarding other valuable inmate resource centers posted in each housing area for easy inmate access.

Reasoning & Findings Statement:

This standard works to ensure that inmates are cognizant of the agency's zero-tolerance policy toward sexual abuse and sexual harassment, as well as have subsequent access to, and can effectively utilize, the PREA reporting mechanism. In speaking with inmates assigned to the PCI, all inmates stated that they were aware of PREA and its purpose within the facility. While inmates were collectively aware of the policy and their rights to varying degrees, all inmates interviewed were specifically aware of at least one, but generally more, methods by which they could report allegations of sexual abuse or sexual harassment. Accordingly, the PCI has demonstrated compliance with the standards related to this provision.

**115.34 Specialized training: Investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination, 11-15-21
- ODRC Training for Trainers: Specialized PREA Training for Correctional Investigators, 12-11-13

PCI Staff Certificate of Training, NIC PREA Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, 8-8-17

- PCI Staff Certificate of Training, NIC PREA Investigating Sexual Abuse in a Confinement Setting: Advanced Investigations, 3-27-20
- PCI Staff Certificate of Training, NIC PREA Investigating Sexual Abuse in a Confinement Setting, 1-10-21

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Administrative (Human Resources) Staff
- PCI Investigative Staff
- OSHP Investigative Staff

Site Review Observations:

- Observed investigative training certifications
- Reviewed agency training records documenting investigative training curriculums

Standard Subsections:

(A) Per policy (79-ISA-01), all investigators must receive specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, conducting investigations in confinement settings. In interviewing PCI and OSHP investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications provided additional documentation to support facility compliance.

(B) Per policy (79-ISA-01), all investigators must receive specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. Among other classes, investigators participate in training which shall include, but not limited to, interviewing techniques for sexual abuse victims, proper use of Garrity warnings, sexual abuse evidence collection and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. In interviewing PCI and OSHP investigative staff, said staff confirmed participation in numerous related courses. Additionally, training curriculums and employee training certifications provided additional documentation to support facility compliance.

(C) The agency maintains documentation that agency investigators have completed the required specialized training related to sexual abuse investigations. Specifically, Policy #79-ISA-01, requires that the "completion of the training shall be documented with a certificate of completion." A review of training certifications confirms that such documentation is maintained within agency files for all investigators currently utilized within the PCI.

(D) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard works to ensure that persons investigating allegations of sexual abuse and sexual harassment have been sufficiently trained in related procedural and due process requirements necessary for both administrative prison hearings and for federal or state judiciary proceedings. The ODRC investigative staff are required to attend both general PREA training, as well as PREA trainings specific to conducting investigations of sexual victimization in a confinement setting. PCI and OSHP

	<p>investigative staff affirmed receipt of sufficient training necessary to confidently conduct sexual abuse investigations in a confinement setting. As well, documentation verified that PCI staff do receive specialized training in excess of the generalized training provided to all staff. As such, the PCI meets the requirements of this standard.</p>
--	---

**115.35**

**Specialized training: Medical and mental health care**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- ODRC PREA Medical & Mental Health Specialized Training Online Lesson Plan, FY22
- PCI PREA training for Contractors, Overview of PREA Policies, 6-7-22
- PCI PREA Medical & Mental Health Test, 6-7-22
- PCI Mandated PREA Training for Medical Contractors, 3-22-22
- PCI PREA Medical & Mental Health Test, 3-22-22
- PCI PREA Training Roster for Medical & Mental Health Staff, FY22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Administrative (Human Resources) Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Ohio State University Medical Center

Site Review Observations:

- Review of facility training records

Standard Subsections:

(A) The PCI provides medical and mental health services to incarcerated persons assigned to its facility. Policy (79-ISA-01) requires that in addition to the generalized training provided to all staff, "all full and part-time medical and mental health staff and contractors shall receive specialized training to include, but not be limited to: how to detect and assess signs of sexual misconduct; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual misconduct; and how and to whom to report allegations or suspicions of sexual misconduct." Interviews with PCI medical/mental health staff, as well as with SAFE/SANE nursing personnel of Ohio State University Medical Center, all confirm that said persons have received trainings as required. A review of agency training records document 100% of medical and mental health personnel have participated in their initial and/or continuing training requirements.

(B) In accordance agency policy and verified through interviews with PCI medical/mental health staff, medical staff at PCI do not conduct forensic medical examinations. Rather, as confirmed by SAFE/SANE personnel, inmates are transported to a nearby public medical facility, Ohio State University Medical Center, for such services.

(C) A review of training records reflects that 100% of the 55 Medical and Mental Health employees assigned to the PCI, have received specialized training appropriate for their professional roles.

(D) As well, in accordance with their professional role, a review of training records reflects medical and mental health practitioners have also received the generalize PREA training provided to all other persons working within a correctional setting.

Reasoning & Findings Statement:

This standard works to ensure that medical and mental health staff have received specialized training for medical and mental health services provided to victims of sexual abuse and sexual harassment. The ODRC has policies in place to ensure all PCI medical and mental health staff are furnished this training. PCI medical and mental health administration confirmed that said staff have received all required and continuing education classes specific to their professional role as it applies to medical and mental health services administered when assisting victims of sexual abuse and sexual harassment. Also, the SAFE/SANE personnel assigned to the Ohio State

	<p>University Medical Center confirmed that all persons conducting forensic medical exams are properly certified to perform said exams. Documentation of agency training verified that said staff do receive specialized training in excess of the generalized training provided to all staff. As such, the PCI meets the requirements of this standard.</p>
--	--

**115.41 Screening for risk of victimization and abusiveness**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-04, PREA Risk Assessments and Accommodation Strategies, 4-1-21
- 67-MNH-02, Mental Health Screening and Mental Health Classification, 3-2-20
- ODRC PREA Assessment Process, PREA Coordinator
- PCI Incarcerated Individual Transfer Authorization, 7-6-22
- PCI PREA Assessment Process, 7-22-22a
- PCI PREA Assessment Process, 7-8-22a
- PCI PREA Assessment Process, 7-22-22b
- PCI PREA Assessment Process, 7-8-22b
- PCI Incident Report, 5-19-22
- PCI PREA Assessment Process, 5-20-22
- PCI PREA Assessment Process, 6-10-22
- PCI Incident Report, 5-1-22a
- PCI Incident Report, 5-1-22b
- PCI PREA Assessment Process, 5-2-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Intake Staff

- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Offenders Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Offenders Who Reported Sexual Abuse
- Limited English Proficient Offenders
- Disabled Offenders
- Random Offenders

Site Review Observations:

- Observed PREA screening demonstration
- Reviewed inmate files

Standard Subsections:

(A) Policy (79-ISA-04) requires that “all inmates shall be assessed for risk of sexual victimization or abusiveness upon arrival of intake and upon transfer to another institution.” The PCI Intake and Medical staff affirm the facility’s adherence to agency policy. Specifically, all offenders received into the facility are screened for sexual victimization and/or sexually abusive risk factors on the same day that the inmates are received into the facility. The Intake and Risk Screen Process were observed by the auditor.

(B) Policy (79-ISA-04) requires that the screenings will be completed “within 72 hours of the inmate’s arrival at the facility.” In speaking with PCI Intake and Medical staff, as well as the PCI Operation Compliance Manager, it was noted that said screenings take place immediately upon each inmate’s arrival to the facility. In accordance with agency policy, of the 1,071 inmates entering the facility (either through intake or transfer) within the past 12 months, 100% were subsequently provided risk screening assessments for their risk of being sexually victimized or for being a sexual abuser within 72 hours of their entry into the facility.

(C) The PREA screening assessment is conducted using an objective screening instrument (the automated PREA Assessment Process). A review of the twenty survey questions provided to offenders does not present with either an implicit bias or leading statements. The PREA Assessment Process does not contain value statements, bias language, or implied negative consequences for affirmative answers to any of the questions asked. Rather, it is a strictly utilitarian form that was administered in a nonjudgmental manner during a mock screening demonstration. To determine an inmate's risk of sexual victimization, an inmate is asked thirteen questions. To determine an inmate's risk of sexual abusiveness, he is asked another seven questions.

(D) The PREA Assessment Process does consider, at a minimum, if the inmate has a mental, physical, or developmental disability. It considers the age of the inmate, the inmate's physical build, whether the inmate has previously been incarcerated, whether the inmate's criminal history is exclusively nonviolent, whether the inmate has prior convictions for sex offenses against an adult or child, whether the inmate has previously experienced sexual victimization, the inmate's own perception of vulnerability, and whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming. Inmates are explicitly asked if they are gay, lesbian, bisexual, transgender, intersex, or gender nonconforming/gender nonbinary. Inmates are then asked if others perceive them as the same. The risk screener is allowed to enter his/her subjective perception of the inmate's gender expression, as well as any additional information regarding the inmate's sexual safety. It should be noted that the ODRC does not detain offenders solely for immigration purposes. During inmate interviews, most inmates stated that they had, in fact, been asked the aforementioned questions upon their receipt into the PCI. Of these, a significant number of inmates interviewed also affirmed that staff later asked them questions related to their sexual safety.

(E) In assessing inmates for their risk of being sexually abusive, the PREA Assessment Form does consider prior acts of sexual abuse, prior convictions for violent offenses, and the history of prior institutional violence or sexual abuse. Along with observing the screening process, the auditor also reviewed several PREA Assessment Forms completed within the auditing time frame. All forms were filled out in their entirety, with inmates having generally provided relevant answers to each of the questions asked. It should further be noted that Intake and Medical staff both confirmed that offenders may refuse to answer any question on the survey or may refuse participation in the entire survey without the threat of negative consequences.

(F) Policy (79-ISA-04) requires that "no sooner than fifteen calendar days, but no later than thirty calendar days from the inmate's arrival at any institution, the inmate shall be reassessed regarding their risk of victimization or abusiveness based upon any additional, relevant information received since that institution's intake screening of

the inmate.” Within the audit time frame, 100% of the 1,070 offenders with a length of stay in the facility for 30 days or more, were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival to the PCI. In speaking with PCI Unit Management staff, their adherence to this policy was confirmed. Additionally, a review of documentation specific to said assessments confirmed both initial and subsequent assessments were provided within the required time frames.

(G) Policy (67-MNH-02) allows that “any employee may make a mental health referral based on his/her observation of the inmate’s behavior or at the inmate’s request, which include referrals based on concerns the inmate has been or is at high risk of being subject to sexual misconduct.” Both the PCI Operation Compliance Manager and staff who perform screening for risk of victimization and abusiveness confirm reassessments are conducted as required. As well, in discussing reassessment processes with inmates, several inmates stated that after having brought concerns for their safety to the attention of security personnel, they were subsequently interviewed by either the PCI Operation Compliance Manager or Unit Management staff regarding these concerns. Ultimately, most of these inmates believed that PCI staff did address their needs in a timely manner. When asked, all of these inmates, as well as all other inmates interviewed, stated that they felt their sexual safety was not at risk at PCI.

(H) Policy (79-ISA-04) expressly prohibits disciplinary sanctions against any inmate who refuses to answer or fails to provide complete and/or accurate answers to any of the questions noted on the PREA Assessment Form. When interviewed, Intake, Medical, and the PCI Operation Compliance Manager affirmed that disciplinary sanctions were not imposed against inmates for refusing or failing to answer any of the questions on the PREA Assessment Form. As well, inmate interviews confirmed that said population was aware of their right not to answer related questions.

(I) Policy (79-ISA-04) requires that PREA “screenings shall be initiated in the PREA risk assessment system by medical personnel during intake medical screenings.” Accordingly, all PREA screenings are provided the same level of privacy as any other medical information assessment. Policy further requires, as well as reinforced by the electronic credential requirements necessary to gain access to the PREA Assessment Form, that facility staff must restrict the spread of information obtained as a function of the PREA Assessment Form to only those designated staff members with an operational need for said information in order to inform classification, housing and work assignments, programmatic and non-programmatic activities, or other relevant institutional activities. The Operation Compliance Manager, Unit Managers, and other operative staff associated with the PREA Assessment Form affirmed the information obtained by way of said document was considered restricted, and as such, was not distributed to unauthorized staff. Lastly, the auditor observed that completed PREA

Assessment Forms did require authorized credentials in order to access said documents within the ODRC electronic data base.

Reasoning & Findings Statement:

This standard works to ensure inmates are properly screened for their risks of sexual victimization and abusiveness. Agency policy provides for an objective PREA Assessment Form, which is administered and scored at the facility level as a simple fact assessment. Inmates are reassessed as required by policy, to include if new information is discovered by facility staff that might warrant changes in inmates' risk status. Interviews with facility screening staff, as well as with inmates, confirm that the proper screening tool is being utilized at the PCI. As well, the information gleaned from this form is appropriately used to inform classification, housing, work, and other facility-based activities. Staff charged with administering PREA Assessment Forms affirm the restricted nature of the information and their adherence to the facility's limited distribution list. As such, the PCI has satisfied the requirements of this standard and is found to meet its expectations.

**115.42 Use of screening information**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-04, PREA Risk Assessments and Accommodation Strategies, 4-1-21
- 79-ISA-05, Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Policy, 7-9-18
- PCI PREA Assessment Process, 5-17-22
- PCI PREA Assessment Process, 5-18-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Intermediate or Higher-Level Facility Staff
- Intake Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Random Staff
- Offenders Who Identify as Lesbian, Gay, Bisexual, Transgender, or Intersex
- Disabled Offenders
- Limited English Proficient Offenders

Site Review Observations:

- Observed PREA screening process
- Reviewed offender files
- Observed offender housing and work assignments

Standard Subsections:

(A) Policy (79-ISA-04) requires that the agency use information from the PREA Risk Screening Form to help separate inmates with a high risk of being sexually victimized from those inmates with a high risk of being sexually abusive. As such, the information gleaned from the PREA Assessment Form is used to inform inmate housing, bed, work, education, and program assignments. In speaking with Intake and Medical staff, as well as the PCI Operation Compliance Manager, once an inmate is deemed as a possible high risk for sexual victimization, staff will ensure that the inmate at risk is not housed in a vulnerable location with respect to other inmates who are assessed at a high risk to sexually abuse other inmates. Facility documentation reflects this is an institutionalized process.

(B) Policy (79-ISA-04) requires that the facility makes individualized determinations on how to ensure the safety of each inmate. In speaking with the PREA Coordinator, the PCI Operation Compliance Manager, and the PCI Warden, staff affirmed that the concerns for every inmate are reviewed on an individual basis. In speaking with inmates currently assigned to the PCI, most stated that their own opinions regarding their personal safety are considered by PCI staff when provided housing or job assignments. Inmates further stated that if their concerns for their own safety changed, they believed PCI staff would take their concerns seriously. As such, there weren't any inmates who expressed any fear or concern for their sexual safety while assigned to PCI.

(C) In deciding whether to assign a transgender or intersex offender to a facility for male or female offenders, agency policy (79-ISA-05) requires that administrators consider, on a case-by-case basis, whether such a placement would ensure the offender's health and safety and whether such a placement would present management or security problems. In deciding whether to assign a transgender or intersex offender to a specific housing or program assignment, agency policy

(79-ISA-05) dictates administrators consider, on a case-by-case basis, whether such a placement would ensure the offender's health and safety and whether such a placement would present management or security problems. In speaking with the

PREA Coordinator, the PCI Operation Compliance Manager, and the PCI Warden, staff affirmed that an inmate's genital status is not the sole determining factor in placing transgender or intersex inmates in male or female facilities, or in placing said inmates within specific housing or program assignments within a facility.

(D) Agency policy (79-ISA-05) requires that the placement and programming assignments of transgender or intersex inmates are reviewed at least every six months to examine any possible safety concerns expressed by the inmate. When interviewed, PCI Unit Management staff did affirm the facility's compliance with this policy. As well, along with routine informal safety checks by the PCI Operation Compliance Manager and housing staff, all transgender inmates confirmed that their living or other environmental concerns for their sexual safety were formally reviewed by agency officials at least every six months.

(E) Agency policy (79-ISA-05) requires that upon the routine review of the placement and programming assignments of transgender or intersex inmates, the transgender or intersex inmate's own view with respect to his or her own safety shall be given serious consideration. When interviewed, PCI staff and the PCI Operation Compliance Manager affirmed that the facility strictly adheres to this policy. Additionally, during random and targeted interviews with inmates, most stated that they believed PCI staff would consider inmates' own views with respect to their own safety.

(F) Policy (79-ISA-04, 79-ISA-05) allows for transgender and intersex inmates to be given the opportunity to shower separately from other inmates. In interviewing transgender inmates, all such inmates were aware of their right to shower separately from the general inmate population. All showers do contain PREA privacy screens.

(G) There aren't any correctional facilities within the ODRC subject to consent decrees, legal settlements, or legal judgments requiring any facility to be established as a dedicated facility or housing unit for lesbian, gay, bisexual, transgender, or intersex offenders. As such, policy

(79-ISA-04) expressly states that "LGBTI inmates shall not be placed in dedicated facilities, units, or wings solely on the basis of such identification." In speaking with the PREA Coordinator, the PCI Operation Compliance Manager, and the PCI Warden, staff adamantly affirm that inmates who identify as transgender or intersex are not placed in a facility, or within a housing assignment, based solely on their sexual or gender identity. During interviews of transgender, gay, and bisexual inmates, none stated that they had ever been housed in a facility, or in a specific housing assignment within the PCI, based solely on their gender identity or sexual orientation. As well, of the random staff interviewed, all staff affirmed that the PCI does not house

transgender, intersex, gay, or bisexual inmates in any specific areas based solely on their gender identity or sexual orientation.

Reasoning & Findings Statement:

This standard works to ensure the adequate use of screening information to promote and protect inmates who may be at high risk of being sexually victimized. The ODRC has numerous policies in place to ensure the most effective and secure use of the PREA Assessment Form. Inmates deemed to be at high risk are routinely monitored by the PCI Operational Compliance Manager, as well as unit staff, to ensure their sexual safety. Agency policies require staff to make individualized determinations on a case-by-case basis regarding inmate safety. Interviews with the agency PREA Coordinator and the PCI Operation Compliance Manager reflect that facility staff have discretion in managing the safety of individual inmates. The PCI Operation Compliance Manager, as well as all other PCI staff, affirm their adherence to agency policies and also confirm that the inmate's own views regarding the inmate's own safety are given serious consideration specific to facility operations. Transgender inmates are allowed to shower separately from the general population. Additionally, transgender inmates are reviewed every six months specific to their placement and programming assignments. As such, agency policy meets, and PCI adheres to, the requirements of this standard.

**115.43 Protective Custody**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Staff Who Supervise Offenders in Segregated Housing
- Offenders Who Reported Sexual Abuse
- Random Inmate Interviews
- Targeted Inmate Interviews

Site Review Observations:

- Observed custody housing assignments

Standard Subsections:

(A) Policy (79-ISA-02) mandates that agency staff shall refrain from placing inmates at high risk for sexual victimization in “involuntary restrictive housing (RH) or in limited privileges housing (LPH) 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. If an Imminent Risk of Sexual Abuse assessment cannot be completed immediately, the inmate may be held in involuntary RH or LPH for less than twenty-four (24) hours while completing the assessment.” In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirm that there have not been any inmates placed in the Involuntary Transitional Program Unit during the audit time frame. As well, inmate interviews did not suggest that PCI utilizes any form of restrictive housing as a primary means of separation for investigatory purposes. As such, there wasn’t any relevant documentation to review.

(B) Policy (79-ISA-02) allows that “the victim shall be housed in an environment that shall, to the extent possible, permit the victim the same level of privileges the victim was permitted immediately prior to the sexual abuse.” Specifically, efforts should be made to ensure these inmates receive similar access to programmatic activities, privileges, educational activities, and work opportunities as offenders assigned to the general population. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document this restriction on the PREA Involuntary Restrictive Housing/Limited Privilege Housing form (DRC1184). As a function of this form, staff must further document the opportunities that have been limited, the duration of the limit, and the reasons for said limitation. In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirm that there have not been any offenders placed in the Involuntary Transitional Program Unit (RH or LPH) for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn’t any relevant documentation to review.

(C) Policy (79-ISA-02) mandates that the Involuntary Transitional Program Unit for inmates at a high risk of sexual victimization shall only be used until an alternative means of separation from likely abusers can be arranged, but no more than 24 hours without an assessment of all available alternatives has been completed. Policy (79-ISA-02) further requires that the assignment shall not ordinarily exceed a period of 30 days. In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirmed that there have not been any inmates placed in the Involuntary Transitional Program Unit for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn’t any relevant documentation to review.

(D) Policy (79-ISA-02) requires that upon placement of an inmate into the Involuntary Transitional Program Unit, the facility must clearly document the basis of the facility’s concern for the offender’s safety. Additionally, the facility must document whether a

determination has been made that there is no available alternative means of separation from the likely abusers, including documentation of what alternatives were considered and assessed to be unavailable. In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirmed that there have not been any inmates placed in the Involuntary Transitional Program Unit for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn't any relevant documentation to review.

(E) Policy (79-ISA-02, 79-ISA-04) requires that an inmate placed in the Involuntary Transitional Program Unit due to being a high risk of sexual victimization shall have this status reviewed within seven calendar days of his initial placement and at least every 30 days thereafter. In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirmed both their knowledge of this policy and the fact that there have not been any inmates placed in the Involuntary Transitional Program Unit for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn't any relevant documentation to review.

Reasoning & Findings Statement:

This standard works to ensure that the use of involuntary protective custody is not a de facto management solution for inmate safety concerns. Agency policy explicitly mandates that staff refrain from placing inmates at high risk for sexual victimization in the Involuntary Transitional Program Unit unless an assessment of all available alternatives has been made and there are no other available means of separation from likely abusers. In speaking with the PCI Operation Compliance Manager and the PCI Warden, staff confirmed that there have not been any inmates placed in the Involuntary Transitional Program Unit for risk of sexual safety during the audit time frame. Additionally, no inmates stated that they had been placed in such housing. As such, there wasn't any relevant documentation to review. Correctional staff routinely assigned to work within Segregated Housing were interviewed. While these staff confirmed that inmates assigned to the Involuntary Transitional Program Unit for high risk of sexual victimization would be afforded similar activities as inmates within general population, to the best of their knowledge, there have not been any such inmates assigned to such housing within the audit time frame. In total, the PCI has satisfied all component parts of this standard and found to have met its provisions.

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>· 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>01-COM-08, Incident Reporting and Notification, 5-14-18</li> <li>· PREA Inmate Poster – Incidents or Suspicions of Sexual Abuse, Harassment, and Retaliation, English</li> <li>· PREA Inmate Poster – Incidents or Suspicions of Sexual Abuse, Harassment, and Retaliation, Spanish</li> <li>· PREA Inmate Poster – Break the Silence, English</li> <li>· PREA Inmate Poster – Break the Silence, Spanish</li> <li>· PREA Inmate Poster – Restrictive Housing Inmates, English</li> <li>· PREA Inmate Poster – Restrictive Housing Inmates, Spanish</li> <li>· ODRC PREA Inmate Education Video with Director Chambers-Smith</li> <li>ODRC Inmate Handbook, Appendix A, 52-RCP-10, PREA Information, English, 1-6-20</li> <li>ODRC Inmate Handbook, Appendix A, 52-RCP-10, PREA Information, Spanish, 1-6-20</li> <li>ODRC Prison Rape Elimination Act (PREA) Reporting MOU, 1-7-21</li> <li>ODRC &amp; ODYS MOU, 10-17-19</li> <li>· ODRC &amp; ODYS MOU, 1-7-21</li> <li>ODRC Employee Online PREA Training PowerPoints w/ Test</li> <li>· ODRC Employee Handbook, Department Policies</li> <li>· PCI Incident Report, 5-1-22</li> <li>· PCI ODRC PREA Hotline Call</li> <li>· PCI Notification of PREA Allegation from another ODRC Facility, 5-16-22</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> </ul>

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Random Staff
- Just Detention International
- Community-Based Victim Advocacy Staff
- Random Offenders
- Offenders Who Disclosed Sexual Victimization During Risk Screening
- Offenders Who Reported Sexual Abuse

Site Review Observations:

- Reviewed documentation related to inmate reports of sexual abuse and sexual harassment.
- Observed PREA Risk Screening assessments
- Observed PREA Risk Screening process
- Observed informational posters throughout the facility advising offenders of various reporting mechanisms for allegations of sexual abuse and sexual harassment
- Observed numerous PREA educational and reporting references available for offender use within the facility Law Library and computer terminals
- ODRC PREA Inmate Education Video with Director Chambers-Smith
- Tested inmate reporting hotlines via inmate phones

Standard Subsections:

(A) The agency provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, as well as neglect or violations of staff responsibilities that may have contributed to such incidents. Additionally, the agency provides numerous avenues by which inmates may report any subsequent retaliatory measures experienced by inmates as a result of having reported said abuse. Upon receipt onto the facility, all inmates are provided a PREA risk screening, via the PREA

Assessment Form, and advised of their right to be free of sexual abuse and sexual harassment under the PREA standards. Inmates are subsequently given a more comprehensive inmate orientation within 7 days of their receipt into the facility. This orientation includes detailed training on the ODRC PREA program. This training includes information on, and contact information for, internal and external reporting agencies. Inmates are also provided with an ODRC Inmate Orientation Handbook, which contains contact information for internal and external reporting agencies and victim services organizations. In interviewing staff, all employees were aware of an inmate's right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. In interviewing inmates, all inmates were equally aware of their right to report allegations of sexual abuse and sexual harassment and to be free from measures of retaliation for having reported said abuse. During random and targeted interviews, all inmates were able to articulate at least one manner by which a report could be made, with the majority of inmates being able to provide multiple reporting methods.

(B) As noted in policy (52-RCP-10), the facility also provides multiple avenues and contact information for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency. Inmates are provided the phone numbers to the Operation Support Center and an Outside Agency Hotline, with calls to both of these agencies being anonymous and without cost to the inmate. Inmates are provided the address to the primary reporting entity, the Ohio Department of Youth Services, which can receive and immediately forward offender reports to agency officials for their investigation. Upon an inmate's request, the Ohio Department of Youth Services will allow an inmate to remain anonymous. Per the agency PREA coordinator, the ODRC does not detain inmates solely for civil immigration purposes. Nonetheless, information on how to contact relevant consular officials is available in the PCI facility Law Library and computer terminals assigned to each housing area.

(C) Per policy (79-ISA-02, 52-RCP-10), staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. All employees interviewed stated that they would act on any report of sexual abuse or sexual harassment regardless of the manner by which they became aware of that information. In doing so, many staff stated that they would document all such reports via a DRC1000 and all staff stated they would document the information as soon as possible following the allegations being presented to them. All inmates interviewed affirmed their right to make either verbal or written reports of sexual abuse and sexual harassment. Most inmates were also aware that they could make reports of sexual abuse and sexual harassment via third party or anonymously. The overwhelming majority of inmates interviewed stated that they believed PCI staff would take any complaint of sexual safety seriously and act accordingly to address their concerns.

(D) Per policy (Employee Handbook, 79-ISA-02, 01-COM-08), staff have an affirmative duty to report any knowledge, suspicion, or information they may have regarding sexual abuse, sexual harassment, or retaliation against inmates or staff for having reported such abuse. Nonetheless, per the Employee Handbook, “staff may privately report sexual misconduct by completing an Incident Report (DRC1000), marked confidential and submitting it directly to the Institutional PREA Compliance Manager or Agency PREA Coordinator. When asked, staff were generally aware that they could make anonymous reports of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This standard works to ensure inmates, staff, and outside agents have the ability to report all instances of sexual abuse and sexual harassment against inmates. The agency does have multiple avenues by which inmates may make formal reports, to include verbal, written, anonymous, and third-party reports. Inmates are provided detailed instructions, contact persons, phone numbers, e-mail addresses, and physical addresses for correspondence where incidents or suspicions of sexual abuse, sexual harassment, and retaliation may be reported. To test the functionality of these services, the auditor utilized the weblink on the ODRC website to submit a written test complaint. In response, the auditor received responsive comments from the agency within one business day. Additionally, while inmates are not encouraged to utilize rape counseling support service centers as reporting avenues, they will also serve in this capacity if explicitly requested by the inmate. With this in mind, the auditor solicited inmate contact information from a rape counseling center central to the PCI and a nationally based referral service. The referral service, Just Detention International, indicated that it did not receive any complaints of sexual abuse or sexual harassment from offenders assigned to the PCI within the reporting time frame. The Sexual Assault Response Network of Central Ohio (SARNCO), a local rape counseling advocacy service, stated that it had the opportunity to discuss advocacy services with one inmate during the audit time frame. During this time, the SARNCO stated that counseling staff had not experienced any interference or difficulty communicating with said inmate. Lastly, the auditor conducted a testing of the PREA Hotline number commonly referenced by the inmates. In doing this, a confirmation response was received within the same business day. In interviewing correctional staff, all such persons were aware that inmates could report allegations of sexual abuse and sexual harassment verbally, in writing, anonymously, and through a third party. When receiving verbal reports of sexual abuse and sexual harassment, all staff recognized the need to take immediate action to protect the inmate in question and the need to document the verbal complaint as soon as possible. In speaking with inmates, all persons were aware of their right to be free from sexual abuse and sexual harassment, as well as their right not to suffer retaliation for having reported such abuse. All inmates understood their right to make verbal and written complaints. The majority of inmates understood their right to make anonymous and third-party

	<p>complaints. As such, it is evident that the PCI has exceeded the requirements of this standard.</p>
--	--

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>· 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• ODRC Appendix A, Investigator Protocol, 11-15-21</li> <li>• ODRC Appendix B, Institution Sexual Abuse Coordinated Response Plan, 11-15-21</li> <li>• ODRC Statement of Fact, PREA Coordinator</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>· PCI Facility Warden</li> <li>· Operation Compliance Manager</li> <li>• Investigative Staff</li> <li>• Random Offenders</li> </ul> <p>Site Review Observations:</p> <ul style="list-style-type: none"> <li>· Reviewed complaint submission process</li> </ul> <p>Standard Subsections:</p> <p>(A) The ODRC does not have administrative procedures to address inmate grievances regarding sexual abuse. However, per policy (79-ISA-02) for purposes of the Prison Litigation Reform Act’s “exhaustion requirement before bringing a lawsuit regarding an allegation of sexual abuse or sexual harassment, inmates must have reported the</p>

incident to facility staff in writing to Operation Support Center staff, to any outside agency DRC has identified as having agreed to receive and immediately forward the inmate reports of sexual abuse and sexual harassment to DRC officials, or to the Chief Inspector's Office, or a third party reported an inmate is the victim of sexual abuse or sexual harassment and the alleged victim confirmed the allegation upon investigation."

(B) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. Nonetheless, inmates may still submit reports of sexual misconduct through the appropriate channels without time limits.

(C) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. Nonetheless, inmates may still submit reports of sexual misconduct to any person without first attempting to resolve the complaint through the person with whom the complaint is against. The complaint is subsequently processed by the institutional investigator, not the person with whom the complaint is against.

(D) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. Per policy (79-ISA-02), via an alternative method of reporting, "a final decision on all allegations of sexual abuse shall be issued by the institutional investigator within ninety (90) calendar days of the initial filing. If ninety (90) calendar days is not sufficient to make an appropriate decision, the institutional investigator may extend the decision up to seventy (70) calendar days. The inmate shall be notified in writing of such extension and be provided a date by which a decision will be made."

(E) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. However, policy (79-ISA-02) does allow a "third party (to) report(ed) an inmate is the victim of sexual abuse or sexual harassment and the alleged victim confirmed the allegation upon investigation."

(F) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. However, policy (79-ISA-02) does allow inmates to file sexual abuse complaints. If this complaint is deemed an emergency, "the managing officer's designee shall provide a documented initial response on the Imminent Risk of Sexual Abuse assessment within forty-eight (48) hours of the receipt of the report. The report shall document the institution's determination whether the inmate is in substantial risk of imminent sexual abuse and

the action taken. The inmate shall also be notified of the initial response within forty-eight (48) hours of the receipt of the report. The documented final decision shall be made within five (5) calendar days of the initial report and... shall document the institution's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken. The inmate shall also be notified of the final decision within five (5) calendar days of the initial report."

(G) Policy (79-ISA-02) does not permit offenders to submit grievances regarding allegations of sexual abuse and sexual harassment. However, policy (79-ISA-02) does allow that "disciplinary action may be taken when it is determined that an inmate made a false report of sexual misconduct...However, no inmate reporting sexual misconduct shall be issued a conduct report for lying based solely on the fact their allegations could not be substantiated or that the inmate later recanted his allegation."

Reasoning & Findings Statement:

This standard works to ensure inmate access to courts by way of exhausting administrative remedies specific to allegations of sexual abuse and sexual harassment. Policy (79-ISA-02) does not permit inmates to submit grievances alleging sexual abuse and sexual harassment. Rather, any grievance regarding such is administratively closed as a grievance. For litigation purposes, namely, the Prison Litigation Reform Act, any documented complaint made by or confirmed by the inmate serves to exhaust administrative remedies. That said, the agency still investigates the allegations; it simply does so by using a different mechanism. In this, the Inmate Grievance Coordinator will forward the allegations of sexual abuse or sexual harassment to the Institutional Investigator. The Institutional Investigator, in coordination with unit administration, then processes the allegations as a formal sexual abuse or sexual harassment complaint. As the proper submission of an inmate complaint alleging sexual abuse and sexual harassment constitutes exhaustion of administrative remedies, the PCI meets the provisions of this standard.

**115.53 Inmate access to outside confidential support services**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 52-RCP-10, PREA Information for Inmate Handbook, English
- 52-RCP-10, PREA Information for Inmate Handbook, Spanish
- ODRC Contact Information for Rape Crisis Programs in Ohio
- PCI Local Rape Crisis Contact Poster, English
- PCI Local Rape Crisis Contact Poster, Spanish
- PCI MOU Ohio Health Sexual Assault Response Network of Central Ohio, 12-30-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Ohio State University Medical Center
- Mailroom Staff
- Random Staff
- ODRC Website Third Party Reporting Coordinator
- Just Detention International
- Sexual Assault Response Network of Central Ohio
- Random Offenders

- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Reviewed PREA Risk Screening Assessment
- Review of distributed information upon PCI reception at Intake areas.
- Observed informational posters throughout the facility advising offenders of various reporting mechanisms for allegations of sexual abuse and sexual harassment
- Observed numerous PREA educational and reporting references available for offender use within the facility Law Library, tablet, and via computer terminal access on inmate housing areas.
- Observed offender general visitation and legal visitation informational posters
- Observed visitation area designated for members of an approved victim advocate service

Standard Subsections:

(A) Policy (79-ISA-01) requires that “the institution OCM and the victim support person shall compile mailing address and telephone number including toll-free hotline numbers of local, state, or national victim advocacy or rape crisis organizations.” The PCI Inmate Orientation Handbook provides contact information for reporting sexual abuse and sexual harassment. Via institutional awareness posters, inmates are also provided the physical address to write for confidential emotional support services. Additionally, the Law Library, as well as each housing area, contains a listing of Contact Information for Rape Crisis Programs in Ohio. This reference includes the contact person, physical address, phone number, and website address for Ohio rape crisis programs as sorted by region. It also included the contact information for local rape crisis centers; namely, Sexual Assault Response Network of Central Ohio. During inmate interviews, many were aware that this information was provided to them via their Inmate Orientation Handbooks.

Per policy (79-ISA-01) the agency does provide toll-free telephone calls to rape crisis advocates and hotlines. Policy (79-ISA-01) also allows that communication between inmates and advocates within these rape crisis centers is as confidential as possible; however, “inmates must be notified that telephone calls are not confidential” in the event that, for security reasons, it becomes necessary to monitor said conversations.

In speaking with Mailroom staff, it was further noted that outgoing mail to rape crisis centers is not restricted or monitored to any extent greater than any other outgoing general correspondence. In this respect, inmates may seal all outgoing mail and send it without prison inspection. Additionally, the agency allows Victim Support Persons, specifically trained for this purpose by the agency, to provide inmates with emotional support related to sexual abuse and sexual harassment.

Per the agency PREA coordinator, the ODRC does not detain inmates solely for civil immigration purposes. Nonetheless, information on how to contact relevant consular officials is available in the facility's Law Library. When interviewed, all inmates knew that the agency provided free rape crisis support services or mental health services to inmates in need of such assistance. Additionally, all offenders were aware of at least one means by which they could contact rape crisis support services, with most offenders knowing that they could access those services by way of the phone number (aka the PREA Hotline) provided via the PREA posters located throughout the facility.

(B) Per policy (79-ISA-01) inmates are notified that calls to the national hotline number (Rape, Abuse, Incest, National Network), as well as to local rape crisis centers, are subject to monitoring.

(C) The PCI has negotiated a contract between itself and Sexual Assault Response Network of Central Ohio to help provide rape crisis support services as requested by inmates assigned to the PCI. The PCI does maintain, and did supply, a facility-based contract for review.

#### Reasoning & Findings Statement:

This policy works to ensure that inmates assigned to the PCI have access to outside confidential rape crisis support services and that access is provided in the most confidential manner as possible. Inmates assigned to the PCI are provided a list of national and/or state-based rape crisis support centers. This list contains a contact name within the crisis center and contact information for related services. Inmates are advised that calls to rape crisis centers are subject to monitoring. The PCI has also secured memorandums of understanding with a local rape crisis center, Sexual Assault Response Network of Central Ohio, for support services. When interviewed, all employees and inmates knew that the agency provided free emotional support or mental health services to offenders upon request. As well, most offenders knew that they could initiate access to those services by contacting the rape crisis center using the information posted on the PREA awareness posters predominately displayed

	<p>throughout the facility. As such, the PCI has met the minimum standards of this provision.</p>
--	---

**115.54 Third-party reporting**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- PREA Inmate Poster - Break the Silence, English
- PREA Inmate Poster - Break the Silence, Spanish
- ODRC Website Email Address for Third Party Reporting

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Random Offenders
- ODRC Website Third Party Reporting Coordinator
- Just Detention International
- Ohio Health Sexual Assault Response Network of Central Ohio

Site Review Observations:

- Review ODRC website specific to PREA and third-party reporting methods
- Tested ODRC online third-party reporting system
- Tested PREA Hotline number inmates can use to engage third-party reporting
- Observed the Offender Visitation Area informational posters

- Observed informational postings and other publications throughout the offender housing areas
- Observed PREA reporting information available in the Law Library, via inmate tablets, and/or via computer terminal access in inmate housing areas

Standard Subsections:

(A) Policy (79-ISA-02) allows for the use of third-party reporting on allegations of sexual abuse and sexual harassment. During the on-site review, signage throughout the facility encouraged offenders to third-party report if needed. As well, public notices on PREA reporting, specifically third-party reporting, were available for review by offender family and friends via the facility's Offender Visitation Room. Additionally, public notice on third party PREA reporting is available to the general public on the agency's website. To verify the system was operational, the auditor submitted a test email to the agency's online reporting address. As well, the PREA Hotline used by incarcerated individuals was also tested for functionality and service. In both instances, a response was received back from the agency within one business day. Documentation review reflected that PCI staff would accept, and does process, third-party PREA allegations to the same extent as complaints made by affected inmates. All staff interviewed confirmed that the PCI would accept third-party reports of sexual abuse. As well, most inmates interviewed believed that the facility would accept, and take seriously, any allegations of sexual abuse reported by a third party.

Reasoning & Findings Statement:

This standard works to ensure a publicly available third-party reporting mechanism exists for claims of sexual abuse and sexual harassment being inflicted upon inmates. In accordance with policy (79-ISA-02), the PCI promotes the use of third-party reporting via informational posters spread out across the facility, to include the Inmate Visitation Area. Electronic contact information is freely distributed on the agency's website to allow the general public direct access to reporting information. To ensure the functionality of the ODRC site, all electronic links were tested and found to be operating as required. To ensure the functionality of the ODRC online third-party reporting system, a test submission was successfully sent. As well, PREA informational posters and the inmate PREA training video also provide inmates with a plethora of agency telephone numbers, physical addresses, and electronic contact methods that can be used to make a third-party report. While inmates themselves should not be able to access Internet resources, they can communicate this reference information to their family, friends, and personal advocates. Inmates themselves are provided numerous state and advocacy addresses to submit third-party correspondence. As well, inmates may also make a third-party party complaint via

<p>any staff member or other PREA reporting mechanisms, such as the PREA Hotline. The PREA Hotline was tested for functionality and service. When interviewed, all staff were aware that the facility would accept and investigate third-party complaints of sexual abuse and sexual harassment from inmate advocates. Accordingly, the PCI has exceeded the provisions of this standard.</p>
---

**115.61 Staff and agency reporting duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- 79-ISA-04, PREA Risk Assessments and Accommodation Strategies, 4-1-21
- 01-COM-08, Incident Reporting and Notification, 5-14-18

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Offenders
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Employee training records

Standard Subsections:

(A) Policy (79-ISA-01, 01-COM-08) mandates that all employees must immediately report all knowledge, suspicion, or information of any sexual misconduct that occurred within the correctional institution. As well, staff have an affirmative duty to report all knowledge, suspicion, or information regarding retaliation against offenders or staff for having reported an incident of sexual abuse and sexual harassment. Staff also have an affirmative duty to report any negligence or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment, or retaliation. A review of employee training records, as well as training curriculum records, reflects that 100% of PCI staff have received initial PREA training, including acknowledgment of their affirmative duty responsibilities. When interviewed, all staff confirmed their obligation to immediately report any information they might have regarding allegations of sexual abuse and sexual harassment.

(B) Policy (79-ISA-02) notifies all staff that "any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decision... Staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary." As such, employees are cautioned to share reported information only with authorized staff. Random staff interviews confirm that facility employees are aware of the sensitive and confidential nature of said complaints. In speaking with the PCI Operation Compliance Manager, the totality and reasoning surrounding the confidential investigatory process was clearly explained.

(C) Policy (79-ISA-02) requires that medical and mental health practitioners have a duty to disclose their mandatory reporting status, including limitations of confidentiality. During medical/mental health services staff interviews, the need for medical staff to inform offenders (at the initiation of professional services) of their duty to report, as well as to their limitations of confidentiality, was affirmed.

(D) All inmates incarcerated within the PCI are legally classified as adults. As such, there aren't any juveniles assigned to this facility. However, per policy (79-ISA-04), the facility may still have persons classified as vulnerable adults. Per policy (79-ISA-04), a vulnerable adult is a person who has been "identified as having an intellectual and/or developmental disability." If an inmate is considered a vulnerable adult, the Institutional Investigator must forward reports of prior sexual victimization to the OSHP. During the audit time frame, PCI did not have any instances of required reporting for vulnerable adults.

(E) Policy (79-ISA-01, 79-ISA-02) mandates that all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to the PCI Institutional Investigator for processing. When interviewing random facility staff, all employees affirmatively responded that any reports of sexual abuse and sexual harassment received by them would be immediately referred to supervisory and/or other entities appropriate for further investigations.

Reasoning & Findings Statement:

This standard works to ensure mandatory staff and agency reporting requirements. Both agency and facility policies mandate staffs' duty to report all allegations of sexual abuse and sexual harassment. Policy further stresses the importance of confidentiality as it applies to reported incidents of sexual abuse and sexual harassment. Lastly, policy requires that all medical and mental health staff disclose their limits of confidentiality and obtain informed consent prior to the initiation of services. In interviewing correctional staff, both uniformed and non-uniformed, all employees expressed an understanding of policy. Training records and course curriculums document correctional staff training specific to mandatory reporting requirements. In interviewing PCI medical and mental health staff, the process of limited confidential and informed consent used by said staff was explained in detail. As well, training records and course curriculums for the specialized training of medical staff document an understanding of mandatory reporting requirements. As such, the PCI meets the provisions established within this standard.

**115.62 Agency protection duties**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Intake Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Offenders
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Review of retaliation monitoring documentation

Standard Subsections:

(A) Per policy (79-ISA-01, 79-ISA-02), when the PCI learns that an inmate is subject to a substantial risk of imminent sexual abuse, agency officials have an affirmative duty to take immediate action to protect the offender. In speaking with the PCI Operation Compliance Manager, PCI Facility Warden, PCI Unit Managers, and random staff, a plethora of possible options were discussed specific to inmate protection measures. However, as the PCI did not find any evidence within the audit time frame that any inmates assigned to the facility were at a substantial risk of sexual abuse, the facility has no documentation for review. Likewise, no protective actions were required.

Reasoning & Findings Statement:

This standard works to actualize the processes of inmate protection. Agency policy (79-ISA-01,

79-ISA-02) requires staff to take immediate action to ensure the safety of all inmates who are at a high risk of sexual victimization. Provided there are no other alternative options available to ensure the inmate's safety, policy (79-ISA-02) further allows the facility to immediately increase the safety of the at-risk inmate by placing said inmate in the Involuntary Transitional Program Unit. However, placement in Involuntary Transitional Program Unit housing would only be used if no other general housing assignments available could ensure inmate safety. During the audit time frame, the PCI did not receive any reports from inmates who were at a substantial risk of sexual abuse. In interviewing random staff, all persons were asked specifically what actions would be taken if an inmate presented as a high risk for sexual victimization. Unequivocally, all staff responded that they would take immediate action to protect the potential victim. Additionally, supervisory staff were questioned as to their role in this potentially dangerous situation. While supervisory staff did provide a more technical and inclusive response, they too, were centrally focused on protecting the inmate. Hence, the PCI has clearly realized the provisions of this standard.

**115.63 Reporting to other confinement facilities**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- 01-COM-08, Incident Reporting and Notification, 9-1-21
- PCI Incident Report, 2-16-22
- PCI Unit to Unit Notification of PREA Allegations, 2-17-22
- PCI Email Notification of PREA Allegations Email, 2-17-22
- PCI Unit to Unit Notification of PREA Allegations, 5-16-22
- PCI PREA Incident Report, 5-13-22
- PCI PREA Incident Report Application, 5-13-22
- PCI SART, 6-8-22
- PCI DOTS Portal, 6-23-22
- PCI Notification of Sexual Assault Investigation Outcome, 6-7-22
- PCI Offender Information Details, 5-18-22
- PCI DOTS Portal, 2-27-02
- PCI Sexual Abuse First Responder Checklist, 5-13-22
- PCI Corrections Reception Center Intake, 5-10-22
- PCI Victim Support Person Activity Report, 5-20-22
- PCI Investigator's Office Statement, 5-20-22
- PCI Notification to OSHP, 5-26-22
- PCI Voluntary Statement, 5-24-22
- PCI Referral to Mental Health Services, 5-18-22

Interviews:

- Agency Head
- PCI Facility Warden
- PCI Operation Compliance Manager
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Review of facility-to-facility referral process

Standard Subsections:

(A) ODRC policy (79-ISA-02) requires that when a facility receives notice regarding allegations of sexual abuse and sexual harassment occurring at another facility, the receiving facility must provide written notice of these allegations to the managing officer (Warden) of the destination facility within 72 hours. A review of documents for the past twelve months reflects that there has been one (1) referral made by PCI to another facility and one (1) received by PCI from another facility.

(B) Per ODRC policy (79-ISA-02), written notice of the aforementioned allegations must be provided as soon as possible, but not more than 72 hours after learning of the allegations. The PCI Warden confirmed that all notices are sent by the Warden's Office to the destination facility as soon as possible, but certainly within 72 hours. Facility documentation was reviewed to support this assertion.

(C) When received, the PCI does document this notification through the use of an Incident Report (DRC1000 Form) in accordance with policy (79-ISA-02, 01-COM-08).

(D) Upon receipt of said allegations, policy (79-ISA-02) requires that the Warden of the destination facility must then process these allegations in accordance with standard protocol. During the audit time frame, the PCI received only one (1) allegation from

other facility.

Reasoning & Findings Statement:

This policy works to ensure agency staff are provided sufficient due process with respect to the timely notification of inmate allegations involving sexual abuse and sexual harassment. Within the last 12 months, the PCI had one (1) referral made by PCI to another facility and one (1) received by PCI from another facility. As such, the PCI has sent one (1) outgoing allegation of sexual abuse from an inmate who reported to PCI staff that such an incident occurred at another facility. Documentation relevant to this reporting process was reviewed and the subsequent notification was found to have occurred within required timelines. This documentation review, along with agency policy, staff comments, and an explanation of the collaborative processes all reflect that the PCI has satisfied the provisions of this standard.

<b>115.64</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation, 11-15-21</li> <li>• 01-COM-08, Incident Reporting and Notification, 5-14-18</li> <li>• 310-SEC-01, Incarcerated Individual and Physical Plant Searches, 9-14-20</li> <li>• Appendix A, Investigator Protocol</li> <li>• Appendix D, Sexual Abuse First Responder Checklist</li> <li>• PCI PREA Training Roster, FY22</li> <li>• PCI #03E-01 PCI, Prison Rape Elimination, 4-20-21</li> <li>• PCI #03E-02 PCI, Sexual Abuse Coordinated Response Plan, 4-20-21</li> <li>• PCI Notification of Sexual Assault Investigation Outcome, 8-30-21</li> <li>• PCI PREA Incident Report Application, 6-24-21</li> <li>• PCI Incident Report, 6-24-21</li> <li>• PCI Medical Exam  Report, 6-24-21</li> <li>• PCI Emergency Assessment, 6-24-21</li> <li>• PCI Mental Health SOAP, 6-30-21</li> <li>• PCI Entrance Restriction, 6-24-21</li> <li>• PCI Mental Health Restrictive Housing Admission Screening, 6-24-21</li> <li>• PCI Referral to Mental Health Services, 6-24-21a</li> <li>• PCI Referral to Mental Health Services, 6-24-21b</li> <li>• PCI Enterprise Information Management Incident Reporting, 6-24-21</li> <li>• PCI Sexual Abuse First Responder Checklist, 6-24-21</li> <li>• PCI Checklist for Attempted or Complete Recent Sexual Abuse, 6-24-21</li> </ul>

- PCI Investigatory Interview Question and Answer Document, 7-7-21
- PCI Acknowledgement and Waiver of Right to Representation, 7-7-21
- PCI Medical Exam Report, 6-24-21
- PCI Voluntary Statement, 6-24-21
- PCI Offender Information Details, 6-24-21
- PCI Victim Support Person Activity Report, 6-24-21
- PCI Inmate Sexual Assault Investigation Question and Answer, 7-7-20
- PCI Notification to OSHP with OSHP Response, 8-30-21
- PCI Sexual Abuse - First Responder Checklist, 5-4-22
- PCI Incident Report, 5-19-22
- PCI PREA Incident Report Application, 5-19-22

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- PCI Investigative Staff
- OSHP Investigative Staff
- Intermediate or Higher-Level Facility Staff
- Random Staff
- First Responders
- Random Offenders
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Review of employee training records

- Review of investigator narrative case files

Standard Subsections:

(A) Policy #03E-01 PCI requires the first responding security staff member to immediately separate the alleged victim and abuser. After ensuring the safety of the victim, policy (79-ISA-01, 79-ISA-02, #03E-01 PCI, 310-SEC-13) requires staff to preserve and protect the crime scene until evidence collection is possible. If the first responder learns that the victim has been sexually abused, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should 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. Once the first responder learns that an offender has been sexually abusive, and the abuse occurred within a time period that still allows for the collection of physical evidence, the first responder should ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. Within the past twelve months, PCI has received five (5) allegations from offenders who claim to have been victims of sexual abuse. Interviews with first responders, as well as documentation related to such, reflects that staff took the appropriate actions required of their role consistent with policy. As well, during contractor and volunteer interviews, it was noted that all contractors and volunteers understood the absolute need to protect the victim, as well as a need to preserve and protect the crime scene or evidence that could be available.

(B) Policy 79-ISA-02 (PCI) requires that non-security first responders contain and assess the situation, notify their immediate supervisor or the security shift supervisor, instruct the victim not to take any action that could destroy physical evidence, and report the specific details, in writing, to the security shift supervisor as soon as possible, and no later than the end of the day. Within the past twelve months, PCI has received five (5) allegations from offenders who claim to have been victims of sexual abuse. In this, two (2) of those claims were made to non-security staff. Interviews with first responders, as well as documentation related to such, reflects that staff understand the appropriate actions required of their role consistent with policy.

Reasoning & Findings Statement:

This standard works to determine whether facility staff understand their role when responding to inmate allegations of sexual abuse and sexual harassment. Of primary

<p>importance is separating and securing the alleged victim and abuser. Of this, all staff interviewed absolutely articulated that point. The majority of staff then articulated the need to preserve any evidence possibly remaining at the crime scene and on the alleged victim. A review of employee training records and class curriculums reflect staff have received required training specific to the preservation of evidence regarding allegations of sexual abuse and sexual harassment. The immediate notification of a security supervisor provides assurance that all subsequent critical steps will be followed. This information, combined with agency policy, staff interviews, facility training documentation, and the review of documentation related to the PREA initiation process sufficiently supports the expectations required by this standard.</p>
--

**115.65 Coordinated response**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- PCI #03E-02 PCI, Sexual Abuse Coordinated Response Plan, 4-26-21

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Incident Review Team Member
- Intermediate or Higher-Level Facility Staff
- Investigative Staff
- Medical Staff
- Mental Health Staff
- SAFE and/or SANE Personnel of Ohio State University Medical Center
- Random Staff

Site Review Observations:

- Review of departmental level facility processes

Standard Subsections:

- The PCI has developed a written institutional plan; namely, #03E-01 PCI, Prison Rape Elimination, 4-20-21, to coordinate actions amongst first responders, medical and mental health practitioners, investigators, and facility leadership in response to incidents of sexual abuse and sexual harassment.

Reasoning & Findings Statement:

This provision works to coordinate facility efforts so that victims of sexual abuse and sexual harassment receive adequate support services. To coordinate facility efforts in the most efficient manner possible, the PCI implemented a unit-based policy, #03E-01 PCI, that details the coordinated response plan to an incident of inmate sexual abuse. In this, the roles of all facility staff are discussed and, perhaps even more importantly, the way those roles interact with one another are outlined. This policy is a conveniently written overview of departmental responsibilities, equipped with notification and referral reminders. When asked, various departmental staff were able to articulate their role in the response process. As well, during inmate interviews, many were able to articulate the responsibilities of responding staff; thus, demonstrating this process has been institutionalized within the facility. As such, the PCI has met all the provisions within this standard.

115.66	<p><b>Preservation of ability to protect inmates from contact with abusers</b></p> <p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• State of Ohio and the Ohio Civil Service Employees Association, 4-21-21 through 2-28-24</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Agency Head</li> <li>• Agency Contract Administrator</li> <li>• Agency PREA Coordinator</li> <li>• PCI Facility Warden</li> <li>• PCI Operation Compliance Manager</li> <li>• Administrative (Human Resources) Staff</li> <li>• Offenders Who Reported Sexual Abuse</li> <li>• Offenders Who Disclosed Sexual Victimization During Risk Screening</li> </ul> <p>Site Review Observations:</p> <ul style="list-style-type: none"> <li>• Reviewed agency labor contracts</li> </ul> <p>Standard Subsections:</p> <p>(A) Per policy (79-ISA-01), both the agency, as well as any other governmental entity responsible for collective bargaining on the agency’s behalf, are prohibited from</p>
--------	--

entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Current contracts between the State of Ohio and the Ohio Civil Service Employees Association, ensures that the ODRC retains the management rights for facilitates to remove alleged staff sexual abusers from contact with inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.

(B) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This provision allows the agency to protect inmates from having contact with sexual abusers and sexual harassers. Policy (79-ISA-01) allows for employees to be suspended from duty pending the outcome of a sexual abuse or sexual harassment investigation. In speaking with investigative staff and the PCI Warden, the process of suspending or separating an employee from employment as a function of a negative sexual abuse or sexual harassment investigation finding was explained. It was also noted that the ODRC; more specifically, the PCI unit administration, has no reservations about discharging employees for engaging in sexual abuse and sexual harassment. Hence, the PCI has satisfactorily met all provisions within this standard.

**115.67 Agency protection against retaliation**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- PCI Sexual Abuse First Responder Checklist, 5-1-22
- PCI Incident Report, 5-1-22a
- PCI Incident Report, 5-1-22b
- PCI Victim Support Person Activity Report, 5-1-22
- PCI PREA Incident Report Application, 5-1-22
- PCI Retaliation Monitoring (Inmate), 5-18-22
- PCI Retaliation Monitoring, (Inmate), 6-18-22
- PCI Retaliation Monitoring, (Inmate), 7-13-22
- PCI Retaliation Monitoring (Staff), 5-18-22
- PCI Retaliation Monitoring (Staff), 6-16-22
- PCI Retaliation Monitoring (Staff), 7-13-22
- PCI SART, 6-30-22
- PCI Referral to Mental Health Services, 5-2-22
- PCI Mental Health Services, 5-3-22
- PCI Offender Information Details, 5-2-22
- PCI Entrance Restriction, 5-1-22
- PCI Medical Evaluation, 5-2-22
- PCI Emergency Department Encounter, 5-1-22
- PCI Voluntary Statement, 5-2-22a
- PCI Voluntary Statement, 5-2-22b

- PCI Employee Identification Form
- PCI OSHP Notification, 6-22-22
- PCI Notification of Sexual Assault Investigation Outcome, 6-24-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Institutional Investigator
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Random Offenders
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Reviewed process for utilizing retaliation monitoring logs

Standard Subsections:

(A) Policy (79-ISA-02) prohibits retaliation for reporting sexual abuse or sexual harassment and for cooperating with a sexual abuse and sexual harassment investigations. In accordance with these policies, the PCI Operation Compliance Manager monitors all retaliation resulting from cases of sexual harassment. The PCI Institutional Investigator monitors all retaliation resulting from cases of sexual abuse.

(B) Per policy (79-ISA-02), the "institution shall 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 and staff who fear retaliation for reporting sexual misconduct or for cooperating with investigations."

(C) Per policy (79-ISA-02), for a minimum of three (3) months following a report of sexual abuse or sexual harassment, the facility shall monitor the conduct and treatment of:

- a. An inmate who reported an incident of sexual abuse or sexual harassment (including a third-party reporter)
- b. An inmate who was reported to have suffered sexual abuse or sexual harassment; and
- c. An employee who reported an incident of sexual abuse or sexual harassment of an inmate.
- d. Monitoring staff shall employ multiple protection measures to prevent inmate retaliation, such as reviewing inmate disciplinary, housing changes, job changes, and program changes.
- e. Monitoring staff shall employ multiple protection measures to prevent staff retaliation, such as negative performance reviews for staff and the reassignment of staff.
- f. Monitoring shall go beyond 90 days if the initial monitoring indicates a continuing need.
- g. Within the past twelve months, the PCI has not had a reported incident of retaliation.

(D) Per policy (79-ISA-02), in the case of inmates, such monitoring shall also include periodic in-person status checks at least every 30 days. Documentation reflects that retaliation monitoring is scheduled and conducted in accordance with policy. Within the audit time frame, there have not been any acts of retaliation noted for having engaged the PREA process.

(E) Per policy (79-ISA-02), if any other individual (staff, volunteer, contractor, offender, adolescent offender, resident, etc.) who cooperates with an investigation expresses a fear of retaliation, the facility and agency shall take appropriate measures to protect that individual against retaliation. Documentation reflects that within the audit time frame, there have not been any expressed concerns of fear for retaliation due to having cooperated with, or having engaged, the PREA process.

(F) The auditor is not required to audit this provision.

Reasoning & Findings Statement:

This standard works to prevent retaliation against employees and inmates for reporting sexual abuse and sexual harassment or for having cooperated with an investigation into such. ODRC policy provides a comprehensive overview of agency protection against sexual abuse and sexual harassment. In speaking with inmates, none noted that they had ever experienced retaliation for participating in a PREA related facility investigation. Both the PCI Operation Compliance Manager and the PCI Institutional Investigator provided detailed explanations of the monitoring process. In speaking with inmates who had filed previous allegations of sexual abuse and sexual harassment, none stated that they had experience retaliation as a function of their reports. The auditor also reviewed the monitoring process of five (5) inmate case files. All inmates associated with these files were monitored for at least 90 days following the allegations, with status checks being conducted approximately every 30 days. Given the totality of the policies provided and staff knowledge regarding the process, the PCI has satisfied the basic provisions of this standard.

**115.68 Post-allegation protective custody**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-04, PREA Risk Assessments and Accommodation Strategies, 4-1-21

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Random Staff
- Staff Who Supervise Offenders in Segregated Housing
- Random Offenders
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Observed the Involuntary Transitional Program Unit

Standard Subsections:

(A) Policy (79-ISA-04) prohibits placing inmates who allege sexual abuse or to be at a high risk of sexual abuse, in involuntary segregated housing unless an assessment of all other available alternatives has been made and a subsequent determination concludes that there are no available alternatives means of separation from likely

abusers. As confirmed by the PCI Warden, within the past twelve months, the PCI has not placed any inmates who have alleged sexual abuse or who are at a high risk of sexual abuse in the Involuntary Transitional Program Unit pending completion of their assessment.

Reasoning & Findings Statement:

Agency policy strictly prohibits the use of involuntary segregated housing; namely, the Involuntary Transitional Program Unit, as a de facto response to inmate safety concerns. Rather, as explained by the PCI Operation Compliance Manager, the use of involuntary segregated housing should be considered only as the last available option, and even at that, as only a temporary measure. While conversations with the PCI Warden and the PCI Operation Compliance Manager did indicate that if absolutely necessary, inmates would be placed in involuntary segregated housing, it would be their absolute last option. Within the reporting time frame, PCI did not place any inmate alleging sexual abuse or sexual harassment within involuntary segregated housing. In speaking with inmates who had filed previous allegations of sexual abuse and sexual harassment, none stated that they had been placed in involuntary segregated housing as a function of their reports. As such, the PCI has satisfied the requirements of this provision.

115.71	Criminal and administrative agency investigations
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• ODRC Record Retention Schedule, 2/2014</li> <li>• PCI Sexual Abuse First Responder Checklist, 5-1-22</li> <li>• PCI Incident Report, 5-1-22a</li> <li>• PCI Incident Report, 5-1-22b</li> <li>• PCI Victim Support Person Activity Report, 5-1-22</li> <li>• PCI PREA Incident Report Application, 5-1-22</li> <li>• PCI Retaliation Monitoring (Inmate), 5-18-22</li> <li>• PCI Retaliation Monitoring, (Inmate), 6-18-22</li> <li>• PCI Retaliation Monitoring, (Inmate), 7-13-22</li> <li>• PCI Retaliation Monitoring (Staff), 5-18-22</li> <li>• PCI Retaliation Monitoring (Staff), 6-16-22</li> <li>• PCI Retaliation Monitoring (Staff), 7-13-22</li> <li>• PCI SART, 6-30-22</li> <li>• PCI Referral to Mental Health Services, 5-2-22</li> <li>• PCI Mental Health Services, 5-3-22</li> <li>• PCI Emergency Assessment, 5-1-22</li> <li>• PCI Offender Information Details, 5-2-22</li> <li>• PCI Entrance Restriction, 5-1-22</li> <li>• PCI Medical Evaluation, 5-2-22</li> <li>• PCI Emergency Department Encounter, 5-1-22</li> </ul>

- PCI Voluntary Statement, 5-2-22a
- PCI Voluntary Statement, 5-2-22b
- PCI Employee Identification Form
- PCI OSHP Notification, 6-22-22
- PCI Notification of Sexual Assault Investigation Outcome, 6-24-22
- PCI Statement of Fact, No Sexual Harassment Allegations During Audit Timeframe, 8-2-22
- PCI Offender Information Details, 8-3-22
- PCI PREA Incident Report Application, 2-1-22
- PCI SART, 4-13-22
- PCI Sexual Abuse First Responder Checklist, 2-1-22
- PCI Incident Report, 2-1-22a
- PCI Incident Report, 2-2-22
- PCI Incident Report, 2-1-22b
- PCI Offender Information Details, 2-1-22
- PCI Victim Support Person Activity Report, 2-1-22
- PCI Separation Order, 2-1-22
- PCI Single Occupancy Cell/Room Restriction, 2-1-22
- PCI Voluntary Statement, 2-1-22a
- PCI Voluntary Statement, 2-1-22b
- PCI For Cause Drug Screening Request, 2-1-22
- PCI Voluntary Statement, 2-23-22
- PCI Referral to Mental Health Services, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Medical Exam Report, 2-1-22
- PCI Mental Health Restrictive Housing Admission Screening, 2-1-22
- PCI Emergency Assessment, 2-1-22
- PCI Referral to Mental Health Services, 2-2-22

- PCI Acute Care Daily Progress Note, 2-17-22
- PCI Mental Health Risk Assessment, 2-2-22
- PCI DOTS Portal, 2-28-22
- PCI Incarcerated Individual Transfer Authorization 2-28-22
- PCI Notification of OSHP Prosecution Pursuit, 3-31-22
- PCI PREA Notification OSHIP, 3-31-22
- PCI Disposition of the Rules Infraction Board, 2-16-22PCI
- PCI Offender Information Details, 2-1-22
- PCI Notification of Sexual Assault Investigation Outcome, 4-7-22
- PCI Enterprise Information Management Incident Reporting, 2-1-22
- PCI Conduct Report, 2-1-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Ohio State Highway Patrol
- Offenders Who Reported Sexual Abuse
- Offenders Who Disclosed Sexual Victimization During Risk Screening

Site Review Observations:

- Reviewed investigator training certifications
- Reviewed agency training records documenting investigator training curriculums
- Reviewed five (5) sexual abuse and sexual harassment case files

Standard Subsections:

(A) Policy (79-ISA-02) requires that when the "institution conducts its own investigation into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymously."

(B) Policy (79-ISA-01, 79-ISA-02) requires investigators to have received specialized training in excess of the generalized sexual abuse and sexual harassment training provided to other staff. In interviewing the PCI Operation Compliance Manager and the PCI Institutional Investigators, said staff confirmed participation in numerous related courses, to include NIC's Investigating Sexual Abuse in a Confinement Setting. Additionally, training curriculums, employee training certifications, as well as completed training rosters, provide additional documentation to support facility compliance.

(C) Per policy (79-ISA-02), Institutional Investigators and/or the PCI Operation Compliance Manager gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Policy (79-ISA-02) allows that Institutional Investigators and/or the PCI Operation Compliance Manager will interview alleged victims, suspected perpetrators, and witnesses. Institutional Investigators and/or the PCI Operation Compliance Manager are also required to review prior reports and complaints of sexual abuse involving the suspected perpetrator.

(D) Policy (79-ISA-02) allows compel interviews only after consulting with the OSHP to determine if compelled interviews may be problematic for subsequent judicial hearings, if deemed appropriate.

(E) Policy (79-ISA-02) requires that the credibility of an alleged victim, suspect, or witness will be assessed on an individual basis and not based on that individual's status as an inmate or staff member. Policy (79-ISA-02) further prohibits the use of a polygraph test or other truth-telling device as a condition of investigating allegations of sexual abuse or sexual harassment. The Institutional Investigator, as well as the OSHP trooper, confirm that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Reviewed documentation supports adherence to this criterion.

(F) Policy (79-ISA-02) requires administrative investigations to consider whether staff actions or failures to act contributed to the sexual abuse and sexual harassment. All administrative investigations are documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence and testimonial evidence, the reasoning behind credibly assessments, as well as investigative facts and findings. The PCI Operation Compliance Manager confirms that the credibility of the interviewed subject is, in fact, determined on an individual basis considering the totality of the evidence presented. Reviewed documentation supports the facility's adherence to this policy.

(G) Policy (79-ISA-02) requires that all criminal investigations are documented in written reports. As a function on that documentation, these reports should include a description of the physical evidence, testimonial evidence, and documentary evidence. Reviewed documentation supports the facility's adherence to this policy.

(H) As noted by the Institutional Investigator and required by policy (79-ISA-02), all substantiated allegations of conduct that appear to be criminal in nature are referred for prosecution. Reviewed documentation supports the facility's adherence to this policy. During the audit time frame, the OSHP has referred four (4) such cases for prosecution.

(I) Policy (Record Retention Schedule, 2014) requires that all ODRC Special Investigation Case Files, to include all sexual abuse and sexual harassment investigations, are retained "10 years after inmate has reached final release, expiration of sentence, death, or 10 years after employee is no longer employed by the agency." After that time period, the documents may be shredded or otherwise deleted. It should further be noted that all criminal investigation files maintained by the OSHP are held indefinitely at the PCI Central Records Unit at the OSHP's General Headquarters.

(J) Policy (79-ISA-02) mandates that "the departure of the alleged abuser or victim from the employment or control of the institution or DRC shall not provide a basis for terminating an investigation."

(K) The auditor is not required to audit this provision.

(L) Policy (79-ISA-01, 79-ISA-02) requires facility staff to cooperate with outside

investigators and endeavor to remain informed about the progress of the investigation. In speaking with the PCI Operation Compliance Manager and PCI Institutional Investigator, it was noted that the OSHP, per a MOU between ODRC and OSHP, maintains an office inside of the facility and generally visits the facility on a regular basis. This facilitates communication between agency staff and the OSHP department, thus ensuring that ODRC staff remain informed on the progress of all sexual abuse investigations.

Reasoning & Findings Statement:

The Ohio State Highway Patrol operates as the law enforcement branch inside of the ODRC and maintains an office inside each ODRC prison. As such, the ODRC conducts its own administrative investigations via agency staff while the OSHP conducts all criminal investigations for allegations of sexual abuse. To work as a criminal investigator within the ODRC, personnel must have law enforcement credentials. As well, to perform administrative investigations, ODRC staff must have met additional training requirements for conducting sexual abuse/sexual harassment investigations within a confinement setting. OSHP staff do have the authority to investigate criminal cases within the ODRC, to include collecting evidence, as well as interviewing victims, suspected perpetrators, and witnesses. OSHP officers have been trained on the standards of evidence required to support a finding of guilt in criminal cases. As well, OSHP officers have been trained on due process and procedural requirements of criminal cases. As confirmed through interviews with ODRC and OSHP staff, OSHP officers and ODRC staff work collaboratively under a memorandum of understanding in order to facilitate communication between the two agencies. Lastly, it is noted that all PREA investigations are referred to the OSHP to determine if the allegations necessitate a criminal investigation and/or subsequent criminal prosecution. As such, the PCI has clearly exceeded the requirements of this standard.

115.72

**Evidentiary standard for administrative investigations**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 7-24-17
- PCI Offender Information Details, 8-3-22
- PCI PREA Incident Report Application, 2-1-22
- PCI SART, 4-13-22
- PCI Sexual Abuse First Responder Checklist, 2-1-22
- PCI Incident Report, 2-1-22a
- PCI Incident Report, 2-2-22
- PCI Incident Report, 2-1-22b
- PCI Offender Information Details, 2-1-22
- PCI Victim Support Person Activity Report, 2-1-22
- PCI Separation Order, 2-1-22
- PCI Single Occupancy Cell/Room Restriction, 2-1-22
- PCI Voluntary Statement, 2-1-22a
- PCI Voluntary Statement, 2-1-22b
- PCI For Cause Drug Screening Request, 2-1-22
- PCI Voluntary Statement, 2-23-22
- PCI Referral to Mental Health Services, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Medical Exam Report, 2-1-22
- PCI Mental Health Restrictive Housing Admission Screening, 2-1-22
- PCI Emergency Assessment, 2-1-22

- PCI Referral to Mental Health Services, 2-2-22
- PCI Acute Care Daily Progress Note, 2-17-22
- PCI Mental Health Risk Assessment, 2-2-22
- PCI DOTS Portal, 2-28-22
- PCI Incarcerated Individual Transfer Authorization 2-28-22
- PCI Notification of OSHP Prosecution Pursuit, 3-31-22
- PCI PREA Notification OSHIP, 3-31-22
- PCI Disposition of the Rules Infraction Board, 2-16-22PCI
- PCI Offender Information Details, 2-1-22
- PCI Notification of Sexual Assault Investigation Outcome, 4-7-22
- PCI Enterprise Information Management Incident Reporting, 2-1-22
- PCI Conduct Report, 2-1-22

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff

Site Review Observations:

- Reviewed procedures for processing sexual abuse and sexual harassment allegations.
- Reviewed five (5) sexual abuse and sexual harassment case files

Standard Subsections:

(A) Policy (79-ISA-02) clearly establishes the standard of proof required to

substantiate claims of sexual abuse and sexual harassment. Policy (79-ISA-02) requires that “the ODRC shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual misconduct are substantiated.” Specifically, per the PCI Investigator, the allegations are determined substantiated, unsubstantiated, or unfounded based on the preponderance of the evidence. For substantiated claims, this simply means that the weight of the evidence must indicate that the allegations are more likely to be true than not true.

Reasoning & Findings Statement:

Agency policy requires that the ODRC establish a standard of proof no higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated. When interviewed, the PCI Operation Compliance Manager and the PCI Institutional Investigators confirmed that standard of proof to be slightly more than half. Documentation supporting this assertion was reviewed and determined to following policy as required. As such, the PCI has satisfied all material provisions for this standard.

**115.73 Reporting to inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 7-24-17
- PCI Offender Information Details, 8-3-22
- PCI PREA Incident Report Application, 2-1-22
- PCI SART, 4-13-22
- PCI Sexual Abuse First Responder Checklist, 2-1-22
- PCI Incident Report, 2-1-22a
- PCI Incident Report, 2-2-22
- PCI Incident Report, 2-1-22b
- PCI Offender Information Details, 2-1-22
- PCI Victim Support Person Activity Report, 2-1-22
- PCI Separation Order, 2-1-22
- PCI Single Occupancy Cell/Room Restriction, 2-1-22
- PCI Voluntary Statement, 2-1-22a
- PCI Voluntary Statement, 2-1-22b
- PCI For Cause Drug Screening Request, 2-1-22
- PCI Voluntary Statement, 2-23-22
- PCI Referral to Mental Health Services, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Medical Exam Report, 2-1-22
- PCI Mental Health Restrictive Housing Admission Screening, 2-1-22
- PCI Emergency Assessment, 2-1-22

- PCI Referral to Mental Health Services, 2-2-22
- PCI Acute Care Daily Progress Note, 2-17-22
- PCI Mental Health Risk Assessment, 2-2-22
- PCI DOTS Portal, 2-28-22
- PCI Incarcerated Individual Transfer Authorization 2-28-22
- PCI Notification of OSHP Prosecution Pursuit, 3-31-22
- PCI PREA Notification OSHIP, 3-31-22
- PCI Disposition of the Rules Infraction Board, 2-16-22PCI
- PCI Offender Information Details, 2-1-22
- PCI Notification of Sexual Assault Investigation Outcome, 4-7-22
- PCI Enterprise Information Management Incident Reporting, 2-1-22
- PCI Conduct Report, 2-1-22
- PCI Statement of Status, No Sexual Abuse Investigations with Unsubstantiated Outcomes, 8-2-22
- PCI Notification of Sexual Abuse Investigation Outcome, 4-7-22

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Designated Staff Member Charged with Monitoring Retaliation
- Investigative Staff
- Ohio State Highway Patrol

Site Review Observations:

- Reviewed procedures for processing sexual abuse and sexual harassment

allegations.

- Reviewed five (5) sexual abuse and sexual harassment case files

Standard Subsections:

(A) Policy (79-ISA-02) requires that “the ODRC shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual misconduct are substantiated.... Following an investigation into an inmate’s allegation that he/she suffered sexual abuse in an institution, the institutional investigator shall inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.”

(B) Policy (79-ISA-02) further requires that “if the ODRC did not conduct the investigation, it shall request the relevant information from the OSHP in order to inform the inmate.” In speaking with PCI Institutional Investigators, the communication process between institutional staff and Ohio State Highway Patrol troopers was discussed.

(C) Policy (79-ISA-02) requires that when an offender has filed allegations of sexual abuse against a staff member (unless unfounded), the institutional investigator shall inform the inmate upon the following:

- a. The staff member is no longer posted within the inmate’s unit;
- b. The staff member is no longer employed at the facility;
- c. The institution learns that the staff member has been indicted on a charge related to sexual abuse within the institution;
- d. The institution learns that the staff member has been convicted on a charge related to sexual abuse within the institution.

(D) Policy (79-ISA-02) requires that when an offender has filed allegations of sexual abuse against another offender, the agency must notify the offender whenever the alleged abuser has been:

- a. Indicted on a charge related to sexual abuse within the facility and
- b. Whenever the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

(E) Policy (79-ISA-02) requires that the agency issue in writing all notifications or attempted notifications regarding disposition to inmate allegations of sexual abuse and/or sexual harassment. Interviews with the PCI Operation Compliance Manager and the PCI Institutional Investigator confirm adherence to said policy. As well, a review of documented notifications support said adherence. Specifically, within the audit time frame, PCI received five (5) investigations into allegations of sexual abuse and/or sexual harassment. All such allegations were investigated, with all inmates receiving notification of subsequent dispositions.

(F) Auditor is not required to audit this provision.

Reasoning & Findings Statement:

Agency policy requires ODRC staff to provide inmates with dispositions for all claims of sexual abuse and sexual harassment. The ODRC conducts all administrative sexual abuse/sexual harassment investigations. While all criminal sexual abuse and/or sexual harassment claims are addressed by the OSHP, agency staff do remain actively engaged in those investigations. Agency policy provides that all inmates who have filed a previous sexual abuse and sexual harassment claims against agency staff or other offenders, receives notification upon a change in housing status for the offender or a change in job status for the employee. Lastly, policy requires these notifications to be documented. Within the audit time frame, PCI documentation reflects inmates are notified of the final disposition to sexual abuse and sexual harassment claims as required by policy. Also, in speaking with inmates who have filed sexual abuse and sexual harassment claims, these persons state that they were provided with a final disposition to their claims. As such, the PCI is operating in accordance with all parts of this provision.

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• 31-SEM-02, Standards of Employee Conduct, 9-3-19</li> <li>• 31-SEM-07, Unauthorized Relationships, 10-4-16</li> <li>• PCI Notification of Sexual Assault Investigation Outcome, 8-30-21</li> <li>• PCI PREA Incident Report Application, 6-24-21</li> <li>• PCI Incident Report, 6-24-21</li> <li>• PCI Medical Exam  Report, 6-24-21</li> <li>• PCI Emergency Assessment, 6-24-21</li> <li>• PCI Mental Health SOAP, 6-30-21</li> <li>• PCI Entrance Restriction, 6-24-21</li> <li>• PCI Mental Health Restrictive Housing Admission Screening, 6-24-21</li> <li>• PCI Referral to Mental Health Services, 6-24-21a</li> <li>• PCI Referral to Mental Health Services, 6-24-21b</li> <li>• PCI Enterprise Information Management Incident Reporting, 6-24-21</li> <li>• PCI Sexual Abuse First Responder Checklist, 6-24-21</li> <li>• PCI Checklist for Attempted or Complete Recent Sexual Abuse, 6-24-21</li> <li>• PCI Investigatory Interview Question and Answer Document, 7-7-21</li> <li>• PCI Acknowledgement and Waiver of Right to Representation, 7-7-21</li> <li>• PCI Medical Exam Report, 6-24-21</li> <li>• PCI Voluntary Statement, 6-24-21</li> <li>• PCI Offender Information Details, 6-24-21</li> </ul>

- PCI Victim Support Person Activity Report, 6-24-21
- PCI Inmate Sexual Assault Investigation Question and Answer, 7-7-20
- PCI Notification to OSHP with OSHP Response, 8-30-21
- PCI Sexual Abuse – First Responder Checklist, 5-4-22
- PCI Incident Report, 5-19-22
- PCI PREA Incident Report Application, 5-19-22

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Ohio State Highway Patrol
- Random Staff

Site Review Observations:

- Review of staff disciplinary protocols for sexual abuse and sexual harassment determinations

Standard Subsections:

(A) Policy (79-ISA-02) clearly advises staff that all “employees shall be subject to disciplinary sanctions up to and including termination for violating ODRC sexual misconduct policies.” Interviews with the PCI Operation Compliance Manager, PCI Facility Warden, and the PCI Institutional Investigators confirm facility adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Interviews with random staff reflect employee awareness to zero-tolerance policies for engaging in sexual abuse and sexual harassment of inmates.

(B) Policies (79-ISA-01, 31 SEM 02, 31 SEM 07) continues by noting that any perpetrator of a sexual abuse or sexual harassment will be dealt with through discipline or prosecution to the fullest extent permitted by law. In this, termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate. Within the audit time frame, PCI has determined two (2) staff from the facility have violated agency sexual abuse or sexual harassment policies. Of these, both (2) PCI staff members have been terminated, or resigned prior to termination, for violating agency sexual abuse or sexual harassment policies.

(C) Policies (79-ISA-01, 31 SEM 02, 31 SEM 07) stipulate disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (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. Interviews with the PCI Operation Compliance Manager, PCI Warden, and PCI Institutional Investigators confirm their adherence to agency policy specific to employee disciplinary and termination processes for any employee found to be engaging in acts of sexual abuse or sexual harassment. Within the audit time frame, PCI has determined two (2) staff from the facility have violated agency sexual abuse or sexual harassment policies. Of these, both (2) PCI staff members have been disciplined for violating agency sexual abuse or sexual harassment policies.

(D) Policy (31-SEM-07) notes that "the Ohio State Highway Patrol shall be notified of all instances of potential criminal sexual offenses committed by staff as defined by Chapter 29 of the Ohio Revised Code. The DRC shall aid in the prosecution of any criminal charges to the fullest extent possible... All terminations for violations of agency sexual misconduct policies shall be reported to DRC legal services by the managing officer for notification to any licensing bodies." Within the audit time frame, PCI has determined two (2) staff from the facility have violated agency sexual abuse or sexual harassment policies. Of these, both (2) PCI staff members 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.

Reasoning & Findings Statement:

This standard works to ensure agency staff understand the gravity and the criminal nature of engaging in sexual abuse or sexual harassment of incarcerated persons. The State of Ohio has made the consequences of engaging in such behavior exceptionally clear. Within the audit time frame, there have been two staff members assigned to the PCI who have violated agency sexual abuse or sexual harassment policies. Both staff members have been terminated, or resigned prior to termination,

	<p>for violating agency sexual abuse or sexual harassment policies. Of these, both staff members 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. Lastly, during staff interviews, all PCI staff expressed their knowledge of the agency's zero tolerance policy. In total, the ODRC, as well as PCI administration, has satisfied the provisions of this standard.</p>
--	---

115.77	Corrective action for contractors and volunteers
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 71-SOC-01, Recruitment, Training, and Supervision of Volunteers, 5-28-18</li> <li>• ODRC Standards of Conduct for Contractors, Volunteers and Interns, 11/2012</li> <li>• PCI Sexual Abuse First Responder Checklist, 5-1-22</li> <li>• PCI Incident Report, 5-1-22a</li> <li>• PCI Incident Report, 5-1-22b</li> <li>• PCI Victim Support Person Activity Report, 5-1-22</li> <li>• PCI PREA Incident Report Application, 5-1-22</li> <li>• PCI Retaliation Monitoring (Inmate), 5-18-22</li> <li>• PCI Retaliation Monitoring, (Inmate), 6-18-22</li> <li>• PCI Retaliation Monitoring, (Inmate), 7-13-22</li> <li>• PCI Retaliation Monitoring (Staff), 5-18-22</li> <li>• PCI Retaliation Monitoring (Staff), 6-16-22</li> <li>• PCI Retaliation Monitoring (Staff), 7-13-22</li> <li>• PCI SART, 6-30-22</li> <li>• PCI Referral to Mental Health Services, 5-2-22</li> <li>• PCI Mental Health Services, 5-3-22</li> <li>• PCI Offender Information Details, 5-2-22</li> <li>• PCI Entrance Restriction, 5-1-22</li> <li>• PCI Medical Evaluation, 5-2-22</li> <li>• PCI Emergency Department Encounter, 5-1-22</li> <li>• PCI Voluntary Statement, 5-2-22a</li> </ul>

- PCI Voluntary Statement, 5-2-22b
- PCI Employee Identification Form
- PCI OSHP Notification, 6-22-22
- PCI Notification of Sexual Assault Investigation Outcome, 6-24-22

Interviews:

- Agency Contract Administrator
- PCI Facility Warden
- Investigative Staff
- Administrative (Human Resources) Staff
- Contractors Who May Have Contact With Offenders

Site Review Observations:

- Review contractor/volunteer files

Standard Subsections:

(A) Policy (Standards of Conduct for Contractors, Volunteers and Interns) advises contractors and volunteers no person shall “allow themselves to show partiality toward, or become emotionally, physically, or financially involved with offenders, paroles, probationers, transitional controlees or their families, or establish a pattern of social fraternization with same.” Policy (79-ISA-01) further notes that “any contractor or volunteer who engages in sexual misconduct is prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and also to relevant licensing bodies.” Interviews with contracted staff and volunteers evidenced that the agency’s zero-tolerance policy was institutionalized. A review of contractor/volunteer files and PREA training materials indicates that all such persons are aware of agency policy regarding the sexual abuse and sexual harassment of inmates. During the audit time frame, PCI has found one (1) contractor to have engaged in sexual abuse of an inmate who was subsequently reported to a law enforcement agency for said conduct.

(B) Policy (79-ISA-01) states that “the facility shall take appropriate remedial measures and terminate the contract or volunteer arrangement with independent contractors or volunteers or shall demand that the offending employee of a contractor be excluded from providing services under the contract.” Policy (71-SOC-01) further states that “the managing officer/designee may suspend/ terminate a volunteer for any alleged violation of the Standards of Conduct for Contractors/Volunteers or any activity which threatens the orderly operation or security of the facility or APA region or safety of the volunteer, staff or offenders.” Interviews with contracted staff and volunteers evidenced that the agency’s zero-tolerance policy was institutionalized. A review of contractor/volunteer files and PREA training materials indicates that all such persons are aware of agency policy regarding the sexual abuse and sexual harassment of inmates. During the audit time frame, PCI has found one (1) contractor to have engaged in sexual abuse of an inmate who was immediately restricted from access to both the facility and inmates.

Reasoning & Findings Statement:

Policy expressly states that contractors and volunteers who engage in sexual abuse with inmates will be removed from contact with inmates pending the outcome of the investigation. Contractors or volunteers who engage in sexual abuse will be reported to law enforcement and to any relevant licensing body. These persons will also be subject to criminal sanctions. During PCI contractor and volunteer interviews, both the prohibition against sexual abuse and sexual harassment of inmates, as well as the consequences of having engaged such, were clearly known. Documentation of contractor and volunteer training records further supports this assertion. Over the past twelve months, the PCI has had one contractor engage in sexual abuse of any inmate. This contractor was subsequently reported to a law enforcement agency, as well as immediately restricted from access to both the facility and inmates. As such, PCI has demonstrated their adherence to both agency policy and federal law. Hence, the provisions of this standard have been met and PCI is in compliance with such.

**115.78 Disciplinary sanctions for inmates**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- 56-DSC-01, Conduct Report and Hearing Officer Procedures, 2-3-20
- 5120-9-06, Inmate Rules of Conduct, 7-3-19
- 5120-9-08, Disciplinary Procedures for Violations of Inmate Rules of Conduct Before the Rules Infraction Board, 1-9-20
- PCI Conduct Report, 7-13-22
- PCI Disposition of the Rules Infraction Board, 7-21-22

Interviews:

- PCI Facility Warden
- PCI Operation Compliance Manager
- Investigative Staff
- Medical Staff
- Mental Health Staff
- Random Staff
- Random Offenders

Site Review Observations:

- Review of offender disciplinary files

Standard Subsections:

(A) Policy (56-DSC-01) provides the standards associated with all disciplinary hearings, to includes hearings related to inmate-on-inmate sexual abuse/sexual harassment. Policy (79-ISA-02) further notes that following an administrative finding that an offender engaged in inmate-on-inmate sexual abuse, said offender is subject to disciplinary sanctions pursuant to formal disciplinary processes. During the audit time frame, the PCI has had one (1) administrative, as well as one (1) criminal finding of inmate-on-inmate sexual abuse.

(B) Policy (56-DSC-01) ensures that disciplinary sanctions imposed are 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. As well, sanctions consider aggravating and mitigating factors. A review of disciplinary hearing records supports adherence to this policy.

(C) When determining an offender's disciplinary sanctions, policy (56-DSC-01, 5120-9-08) does consider how an offender's mental disabilities or mental illness contributed to his behavior. PCI disciplinary documentation reflects that the mental disabilities of inmates are, in fact, given consideration during the disciplinary process. A review of disciplinary hearing documentation does reflect the mental state of inmates is given consideration during the sentencing phase of disciplinary proceedings.

(D) Per policy (79-ISA-02), "all inmates found guilty of sexual abuse shall be given appropriate programming and interventions if determined to be necessary by mental health services in consultation with sex offender services." As noted by PCI Mental Health staff, programming and/or interventions services are provided to inmates found to have engaged in sexual abuse.

(E) Per policy (79-ISA-02), "the ODRC may discipline an inmate for sexual contact and/or sexual conduct with staff only upon finding out that the staff member did not consent to such contact or conduct."

(F) Per policy (79-ISA-02), a report made in good faith based upon a reasonable belief that the alleged conduct did occur does not constitute falsely reporting an incident or lying for the purpose of disciplinary action, even if the investigation does not establish evidence sufficient to substantiate the allegations.

(G) Per policy (5120-9-08), the agency clearly distinguishes between consensual sex, which is still a violation of agency policy, and inmate-on-inmate sexual abuse, which is defined as when one or more offenders engage in sexual conduct, including sexual contact, with another offender against his or her will or by use of force, threats, intimidation, or other coercive actions.

Reasoning & Findings Statement:

The inmate disciplinary process is a formal means to address institutional misconduct. The PCI uses a progressive disciplinary system, which allows for consideration of aggravating and mitigating factors. Within the audit time frame, the PCI has processed one (1) administrative findings of guilt regarding inmate-on-inmate sexual abuse that occurred at the facility. As well, the facility did refer this finding for criminal prosecution. A review of documentation reflects that the mental health and of an inmate is given serious consideration in sentencing and availability of subsequent mental health services. In considering agency policies, facility procedures, staff interviews, and offender comments, PCI is compliant with disciplinary standards as required under this provision.

115.81	Medical and mental health screenings; history of sexual abuse
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• 79-ISA-01, Prison Rape Elimination Policy, 11-15-21</li> <li>• 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21</li> <li>• 79-ISA-04, PREA Risk Assessments and Accommodation Strategies, 4-1-21</li> <li>• PCI PREA Assessment Process, 10-7-21</li> <li>• PCI Medical/Mental Health Screening, 10-7-21</li> <li>• PCI Mental Health SOAP, 10-18-21</li> <li>• PCI PREA Assessment Process, 7-25-22</li> <li>• PCI Referral to Mental Health Services, 7-27-22</li> <li>• PCI Mental Health SOAP, 7-29-22a</li> <li>• PCI Referral to Mental Health Services, 7-26-22</li> <li>• PCI Mental Health SOAP, 7-28-22</li> <li>• PCI Referral to Mental Health Services, 7-26-22a</li> <li>• PCI Mental Health SOAP, 7-29-22b</li> <li>• PCI PREA Classification Report, 8-4-22</li> <li>• PCI PREA Assessment Process, 7-25-22</li> <li>• PCI Ohio Department of Rehabilitation and Correction Informed Consent, 12-08-21</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• PCI Operation Compliance Manager</li> <li>• Intake Staff</li> </ul>

- Investigative Staff
- Medical Staff
- Mental Health Staff
- Staff Who Perform Screening for Risk of Victimization and Abusiveness
- Offenders Who Reported Sexual Victimization During Risk Screening

Site Review Observations:

- Observed Medical Department and Risk Screening Areas
- Review of Medical/Mental Health PREA Screening Forms

Standard Subsections:

(A) Policy (79-ISA-04) requires that upon arrival, all PCI inmates will be screened for sexual abuse risk factors. If the assessment indicates that the inmate has had prior sexual victimization, whether it occurred in an institutional setting or in the community, staff will offer a follow-up meeting with a mental health or medical practitioner within fourteen calendar days of the intake screening. Within the audit time frame, 100% of offenders received at the PCI who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner. Interviews with inmates who reported previous sexual victimization verify this finding. Also, a review of both medical and mental health referrals, as well as conversations with medical and mental health staff, confirms the institutionalization of this practice.

(B) Per policy (79-ISA-04), persons with a history of being sexually abusive must be referred for mental health services within 14 calendar days. In speaking with Mental Health staff, it is noted that the nature of the referral is in accordance with the individualized needs of each inmate. As noted by the PCI Operational Compliance Manager, within the audit time frame, 100% of offenders received at the PCI who had previously perpetrated sexual abuse, as indicated during the screening, were offered a follow-up meeting with a mental health practitioner.

(C) Per policy (79-ISA-04), regular mental health referrals are addressed within a timeframe consistent with the nature of the referral and within 14 days of the intake

screening. Review of PREA assessment documentation verifies PCI's adherence to agency policy.

(D) Per policy (79-ISA-02) and in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. 115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to 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 laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting.

(E) Per policy (79-ISA-04) and in accordance with the Prison Rape Elimination Act (PREA) Standards, 28 C.F.R. §115.81, any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to 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 laws. As noted by medical and mental health staff during the interview process, medical and mental health practitioners shall obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18 years or considered a vulnerable adult. In speaking with medical and mental health staff, it was noted that staff do require informed consent prior to reporting incidents of prior sexual victimization that did not occur in an institutional setting for all persons except juveniles and individuals with developmental disabilities.

#### Reasoning & Findings Statement:

Within the audit time frame, 100% of inmates who had disclosed prior victimization during risk screening were offered a follow-up meeting with a medical or mental health practitioner. Within the audit time frame, 100% of offenders who had previously perpetrated sexual abuse as indicated during risk screening were offered a follow-up meeting with a medical or mental health practitioner. As noted by medical and mental health staff, the PCI is providing routine and regular medical screens and other health services in accordance to qualified medical assessments, as well as to policy. Documentation specific to the PREA Assessment Form for medical and mental health staff reflects the appropriate use of the screening tool to determine necessary housing and medical needs. Lastly, per agency, all inmates except juveniles and individuals with developmental disabilities, are required to provide informed consent

<p>prior to facility staff reporting information about prior sexual victimization that did not occur in an institutional setting. PCI has provided documentation to demonstrate it compliance with this requirement. As such, the facility has clearly met the provisions as established within this standard.</p>
--

**115.82 Access to emergency medical and mental health services**

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- B-11, Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse, 9-28-15
- 67-MNH-09, Suicide Prevention, 7-1-21
- 68-MED-15, Bureau of Medical Services Co-Payment Procedures, 9-10-18
- PCI Incident Report, 2-1-22a
- PCI Incident Report, 2-1-22b
- PCI Incident Report, 2-2-22
- PCI Medical Assessment, 2-1-22
- PCI Emergency Assessment, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Victim Support Person Activity Report, 2-1-22
- PCI Mental Health Schedules, August 2021
- PCI Memo On-Call Psychiatry, 12-14-21
- PCI Medical Assessment, 5-19-22

Interviews:

- PCI Operation Compliance Manager
- Medical Staff
- Mental Health Staff

- SAFE and/or SANE Personnel of Ohio State University Medical Center
- Security Staff and/or Non-Security Staff Who Have Acted As First Responders
- Random Staff

Site Review Observations:

- Observed Medical Department
- Review of Medical/Mental Health Screening Form

Standard Subsections:

(A) In accordance to the ODRC Office of Correctional Health Care policy (B-11), “all inmates who report sexual conduct and/or recent sexual abuse shall be escorted to inmate health services as soon as possible after the reported conduct or recent sexual abuse.” In interviewing medical and mental health staff, said staff confirmed the ability to treat inmates in accordance to their professional medical judgement. It was further noted by medical and/or mental health staff, and confirmed within policy (B-11), that “if evidentiary or medically appropriate, the patient will be transported to the Emergency Department (ED) for examination, treatment, and counseling.”

(B) Policy (68-MED-01) requires the facility to maintain twenty-four (24) hour medical coverage, to include an on-call physician. Policy (67-MNH-09) further requires that “each institution shall develop a written plan for twenty-four (24) hour emergency mental health service availability. The plan shall include an on-site emergency crisis intervention.” In speaking with medical and mental health staff, 24-hour availability of qualified medical and mental health practitioners was affirmed. Additionally, staffing requirements, and subsequent scheduling documentation, confirms the continuous availability of qualified medical and mental health staff. Lastly, during interviews with first responders, as well as random security staff, all personnel recognized with immediacy the need to notify medical staff of any sexual abuse allegations.

(C) Policy (B-11) requires that “each patient who is treated for sexual conduct or recent sexual abuse will be offered timely and appropriate prophylactic information and treatment for sexually transmitted diseases.” In speaking with medical staff, adherence to this policy was confirmed. In speaking with medical and SANE/SAFE personnel, it was further noted that all medical precautions, to include appropriate

prophylactic information and treatment for sexually transmitted diseases, are given to victims of sexual abuse. Inmates who had previously made allegations of sexual abuse also confirmed that they had received medical and/or mental health treatment in a timely manner.

(D) Policy (79-ISA-02) notes that “all victims of sexual abuse shall have access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. The service shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident.” In speaking with medical staff, adherence to this policy was confirmed. Additionally, inmates who had previously received medical treatment for allegations of sexual abuse generally confirmed that they were not charged a medical fee for said services.

**Reasoning & Findings Statement:**

This standard is designed to provide inmates access to emergency medical and mental health services. In this, facility staff are meeting all of the provisions within this standard. Policy (B-11) allows that upon receipt of an offender into the Medical Department, medical staff shall determine the offender’s course of treatment; specifically, what is medically indicated on the basis of evidence collection or physical trauma. Inmate interviews further acknowledge that inmates are provided appropriate medical and mental health treatment. Lastly, documentation reflecting access to medical and mental health care, to include outside services, was reviewed. In reviewing the totality of the information provided, the PCI has met the minimums provisions of this standard via emergency (24-hour) access to qualified medical staff. The PCI has also exceeded the minimums provisions of this standard by not only providing timely access to mental health services, but also by ensuring that a qualified mental health practitioner is available 24-hours a day.

<b>115.83</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
---------------	--

**Auditor Overall Determination:** Exceeds Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-02, Prison Sexual Misconduct Reporting, Response, Investigation, and Prevention of Retaliation Policy, 11-15-21
- 67-MNH-02, Mental Health Screening and Mental Health Classification, 3-2-20
- 67-MNH-04, Transfer and Discharge of the Mental Health Caseload, 7-1-21
- 67-MNH-15, Mental Health Treatment, 7-1-21
- B-11, Medical Care Guidelines for Sexual Contact or Recent Sexual Abuse, 9-28-15
- PCI Medical Assessment, 2-1-22
- PCI Emergency Assessment 2-1-22
- PCI Referral to Mental Health Services, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Mental Health Transfer Summary, 4-14-22
- PCI Referral to Mental Health Services, 2-2-22
- PCI Mental Health Risk Assessment, 2-2-22

Interviews:

- PCI Operation Compliance Manager
- Medical Staff
- Mental Health Staff

Site Review Observations:

- Observed Medical Department
- Review of Medical and Mental Health PREA Screening Forms

Standard Subsections:

(A) Policy (79-ISA-02) requires that all allegations of sexual assault must be evaluated immediately by the facility health staff. In this, “medical services shall follow Medical Protocol B-11, Medical Care Guidelines for Sexual Conduct or Recent Sexual Abuse, which includes instructions for assuring appropriate examination, documentation, transport to the local emergency department, testing for sexually transmitted diseases, counseling, prophylactic treatment, follow-up, and referral for mental health evaluation.” In speaking with medical and mental health staff, adherence to this policy was confirmed. In speaking with correctional staff, there were no instances where any staff indicated that the medical or mental health departments had ever, or would ever, refuse to provide medical or mental health treatment to any inmate who claimed to have been a victim of sexual abuse. In speaking with inmates who were previously receiving mental health treatment services for sexual abuse or sexual harassment allegations, they confirmed that upon disclosing such, or upon facility transfer, they were allowed to speak with mental health staff at their assigned facility.

(B) In reviewing a collection of mental health policies, it is evident that the ODRC offers continuing mental health services to inmates throughout their assignment to the ODRC and even upon their release from the agency. Specifically, policies (67-MNH-02, 67-MNH-04, 67-MNH-15) require that mental health services are “notified of all requests to transfer an incarcerated individual on the Mental Health Caseload... All transferred incarcerated individuals shall be screened at the receiving institution in accord with ODRC Policy... At that time, the individual shall be scheduled for appropriate continued mental health care... All Mental Health Treatment Plans for C1 and C2 classifications shall include a goal and intervention that addresses re-entry needs.” Documentation provided supports the facility’s adherence to said policy.

(C) Policy (79-ISA-02, 67-MNH-15) requires that all victims of sexual abuse shall 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. If not referred to an outside hospital emergency department, the inmate is treated in the facility infirmary after evaluation by a primary care provider. In each instance, as confirmed by medical and mental health staff, related services are provided in accordance to

the judgement of qualified health care providers. Documentation provided supports the facility's adherence to said policy.

(D) Within the past 12 months, PCI has not had any biological females incarcerated at the facility. Accordingly, pregnancy tests are not medically appropriate.

(E) Within the past 12 months, PCI has not had any biological females incarcerated at the facility. Accordingly, pregnancy services are not medically appropriate.

(F) Policy (B-11) requires that when medically appropriate, the following tests will be ordered: serology for syphilis (RPR), GC and chlamydia, HIV, HBV, and HCV. Additionally, "each patient who is treated for sexual conduct or recent sexual abuse will be offered timely and appropriate prophylactic information and treatment for sexually transmitted diseases." In speaking with medical staff, it was noted that all inmates are provided medical services as appropriate for the nature of their concerns. In speaking with inmates who had previously alleged sexual abuse, agency adherence to this policy was confirmed. Documentation provided by PCI supports the facility's adherence to said policy.

(G) Policy (79-ISA-02) notes that "all victims of sexual abuse shall have access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. The service shall be provided to the alleged victim regardless of whether the victim names the alleged abuser or cooperates with any investigation arising out of the incident." In speaking with medical staff, as well as the SAFE/SANE personnel of the local hospital, adherence to this policy was confirmed. Additionally, PCI inmates who had previously received medical treatment for allegations of sexual abuse also confirmed that they were not charged a medical fee for said services.

(H) Policy (79-ISA-02) requires that "mental health services shall attempt to conduct an evaluation on all known abusers within sixty (60) calendar days of learning of such history and offer treatment when deemed appropriate." In speaking with mental health staff, it was noted that while agency policy allows for 60 days to evaluate abusers, to help ensure the safekeeping of all inmates, any known abusers are generally evaluated at a much faster rate. PCI documentation reflects adherence to this criterion. Specifically, 100% of all known abusers entering the facility have been scheduled for an evaluation by mental health services within the required time frame. Documentation provided supports the facility's adherence to said policy.

Reasoning & Findings Statement:

This standard is designed to ensure ongoing medical and mental health care for sexual abuse victims and abusers. The PCI offers qualified and coordinated medical and mental health care regardless of an inmate's ability to pay for said services. As appropriate, inmates are provided the opportunity to attend follow-up treatments, for both medical and mental health services. Once established, agency policy requires that access to said treatment follows the inmate throughout the ODRC system and can be coordinated with community care upon the inmate's release from the ODRC. The medical and mental health services provided are consistent with the community level of care. Additionally, because this level of care is coordinated to ensure that inmates receive every aspect of sexual abuse treatment, addressing both medical and mental health needs on a regular and timely basis, without regard to cost, the opportunity for treatment received in this institutional setting far exceeds that of individuals receiving similar treatments within the community. Accordingly, the PCI Medical and Mental Health Departments have collectively exceeded the provisions of this standard.

**115.86 Sexual abuse incident reviews**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- 79-ISA-03, Sexual Abuse Review Team, 7-17-17
- PCI PREA Incident Report Application, SART, 4-13-22
- PCI PREA Incident Report Application, 2-1-22
- PCI Incident Report, 2-1-22a
- PCI Incident Report, 2-1-22b
- PCI Offender Information Details, 2-1-22
- PCI Victim Support Person Activity Report, 2-1-22
- PCI Separation Order, 2-1-22
- PCI Single Occupancy Cell/Room Restriction, 2-1-22
- PCI Voluntary Statement, 2-1-22a
- PCI Voluntary Statement, 2-1-22b
- PCI For Cause Drug Screening Request, 2-1-22
- PCI Voluntary Statement, 2-23-22
- PCI Referral to Mental Health Services, 2-1-22
- PCI Mental Health SOAP, 2-22-22
- PCI Medical Exam Report, 2-1-22
- PCI Mental Health Restrictive Housing Admission Screening, 2-1-22
- PCI Emergency Assessment, 2-1-22
- PCI Referral to Mental Health Services, 2-2-22
- PCI Acute Care Daily Progress Note, 2-17-22
- PCI Mental Health Risk Assessment, 2-2-22

- PCI DOTS Portal, 2-28-22
- PCI Incarcerated Individual Transfer Authorization 2-28-22
- PCI Notification of OSHP Prosecution Pursuit, 3-31-22
- PCI PREA Notification OSHIP, 3-31-22
- PCI Disposition of the Rules Infraction Board, 2-16-22PCI
- PCI Offender Information Details, 2-1-22
- PCI Notification of Sexual Assault Investigation Outcome, 4-7-22
- PCI Enterprise Information Management Incident Reporting, 2-1-22
- PCI Conduct Report, 2-1-22
- PCI SART, 4-13-22
- PCI PREA Incident Report Application, 2-1-22
- PCI Incident Report, 2-2-22

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager
- Incident Review Team Member

Site Review Observations:

- Reviewed Incident Review Team procedures

Standard Subsections:

(A) Policy (79-ISA-03) states that the Sexual Abuse Review Team (SART) “shall review all sexual abuse incidents, unless determined to be unfounded, within thirty (30)

calendar days of the conclusion of investigation.” During the audit time frame, the PCI received four (4) sexual abuse allegations, excluding only unfounded incidents. Accordingly, per the PCI Operation Compliance Manager, the PCI has engaged four (4) Sexual Abuse Review Team meetings. In speaking with the PCI Operation Compliance Manager, the PCI Warden, and the PCI Institutional Investigator, each person explained their role within the incident review process.

(B) Policy (79-ISA-03) requires the Sexual Abuse Review Team (SART) to “review all sexual abuse incidents, unless determined to be unfounded, within thirty (30) calendar days of the conclusion of investigation.” During the audit time frame, the PCI received four (4) sexual abuse allegations, excluding only unfounded incidents. Accordingly, per the PCI Operation Compliance Manager, the PCI has engaged four (4) Sexual Abuse Review Team meetings. Documentation evidencing the practice of Sexual Abuse Review Teams was reviewed to ensure timely compliance.

(C) Policy (79-ISA-03) requires that “each managing officer shall designate a Sexual Abuse Review Team (SART). The SART shall, at a minimum, consist of:

- a. Institution Operational Compliance Manager (OCM) – Chair;
- b. A Deputy Warden;
- c. Institutional Investigator;
- d. Designated Victim Support Person;
- e. Any other staff that may have relevant input, such as unit staff, line supervisors, medical and mental health professionals.”

Documentation was reviewed to ensure SART meetings did contain the proper personnel mixture.

(D) Policy (79-ISA-03) requires that “the SART shall consider:

- a. Whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
- b. Whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
- c. Whether the area in the facility where the incident allegedly occurred contains physical barriers in the area may enable abuse;

- d. The adequacy of staffing levels in that area during different shifts;
- e. Whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- f. Following consideration, “the SART shall complete the Sexual Abuse Case Review in the electronic PREA Incident Reporting System and document the committee findings,” as well as any recommendations for improvement.

(E) Upon completion of the incident review report, the “managing officer shall implement the recommendations outlined in the Sexual Abuse Case Review for improvement or shall document its reasons for not doing so.” In speaking with the PCI Warden, the responsibilities of the managing officer to implement SART recommendations was explained.

Reasoning & Findings Statement:

During the audit time frame, the PCI received four (4) sexual abuse allegations, excluding only unfounded incidents. As such, it was necessary to engage the Sexual Abuse Review Team upon the conclusion of each sexual abuse investigation, with the exception of unfounded investigations. A review of documentation reflects the timely convergence of those designated staff members. In speaking with the PCI Operation Compliance Manager, the PCI Warden, and the PCI Institutional Investigator, each person explained their role within the incident review process. As such, it is evident that the facility has procedures in place to engage incident reviews and that staff are knowledgeable in their obligations to the team. Accordingly, PCI has satisfied the requirements of this standard.

**115.87 Data collection**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- ODRC 2020 Annual Internal Report on Sexual Assault Data
- ODRC 2021 Annual Internal Report on Sexual Assault Data
- ODRC PREA Incident Packet Instructions

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager

Site Review Observations:

- Extensive review of agency website/PREA section
- Reviewed 2021 PREA Outcome Measures

Standard Subsections:

(A) Policy (79-ISA-01) provides all staff within the ODRC a standardized set of definitions specific to sexual abuse/sexual harassment allegations. Policy (79-ISA-01) further mandates that all "institution investigators shall report allegations of sexual misconduct they investigated on their monthly reports, along with the dispositions of same. This information should also be provided to the Bureau of Research for compilation and analysis." In speaking with the PCI Institution Investigator, adherence to this provision was confirmed.

(B) Policy (79-ISA-01) further requires that “the institution investigators shall ensure all fields in the PREA Incident Reporting System as provided by the agency PREA coordinator are accurately completed. This data shall be aggregated at least annually.” In speaking with the PCI Institution Investigator, adherence to this provision was confirmed.

(C) Per the ODRC Annual Internal Report on Sexual Assault Data (2020 & 2019), “the ODRC completes the U.S. Department of Justice, Bureau of Justice Statistics Survey of Sexual Victimization report.” Furthermore, as confirmed by the ODRC PREA Coordinator, the data includes all information necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Bureau of Justice Statistics.

(D) Policy (79-ISA-01) requires that “all case records associated with allegations of sexual misconduct or retaliation including incident reports, investigation reports, offender information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling shall be securely retained in accordance with the DRC records retention schedule.” The ODRC PREA Coordinator confirmed the agency’s overall adherence to this policy. As well, the PCI Operation Compliance Manager and PCI Institution Investigator confirmed that above reference sources were continuously used to inform the agency’s annual statistical reports.

(E) Policy (79-ISA-01) mandates that “the agency PREA coordinator/designee must ensure all aggregated sexual misconduct data received from private facilities with which it contracts is readily available to the public at least annually through the DRC internet site.” The ODRC PREA Coordinator confirmed the agency’s overall adherence, as well as the specific adherence of the agency’s three ODRC private facilities, to this policy. Review of the agency’s website finds this information readily available:  
<https://drc.ohio.gov/prea>

(F) Policy (79-ISA-01) requires that the PREA Coordinator provide aggregated data on sexual abuse and sexual harassment occurring within the ODRC to the Department of Justice (DOJ); specifically, the Bureau of Justice Statistics, on an annual basis. As confirmed by the PREA Coordinator, said data is provided to the DOJ no later than June 30th of each year.

Reasoning & Findings Statement:

<p>This standard works to ensure that specific data relative to promoting sexual safety within a correctional institution is collected on a monthly basis. That data is then aggregated and made available for public review. The PCI has complied with the timely collection of said data and subsequently furnishes it to appropriate entities as required. Hence, the PCI has met all provisional requirements and is in compliance with this standard.</p>
--

**115.88 Data review for corrective action**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- ODRC 2020 Annual Internal Report on Sexual Assault Data
- ODRC 2021 Annual Internal Report on Sexual Assault Data
- ODRC Website Annual Reports

Interviews:

- Agency Head
- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager

Site Review Observations:

- Extensive review of agency website/PREA section
- Reviewed 2021 PREA Outcome Measures

Standard Subsections:

(A) Policy (79-ISA-01) requires the PREA Coordinator to prepare and aggregate data related to sexual abuse and sexual harassment across all ODRC facilities. Following which, the ODRC then uses that data to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training. Specifically, the ODRC works to identify problem areas, take corrective action on an ongoing basis, and prepares an annual report of its findings from the data review and any corrective

actions for each facility, as well as the agency as a whole. The PREA Coordinator confirmed adherence to this policy. As well, the ODRC Annual Internal Report on Sexual Assault Data for years 2020 and 2021 does reflect the intelligent use of said data.

(B) Policy (79-ISA-01) requires that annual statistical reports “shall include a comparison of the current year’s data and corrective actions with those from prior years and shall provide an assessment of the DRC’s progress in addressing sexual misconduct.” The PREA Coordinator confirms adherence to this policy. As well, the ODRC Annual Internal Report on Sexual Assault Data for years 2020 and 2021 does reflect a comparative analysis across years.

(C) Policy (79-ISA-01) requires that upon completion of each year’s Annual Internal Report on Sexual Assault Data, “the report shall be approved by the Director and posted on the DRC internet site.” A review of the ODRC website indicates that upon approval from the agency director, the report is then made available to the public through the ODRC website. The PREA Coordinator confirms adherence to this policy. Furthermore, a review of the ODRC website finds all agency PREA reports publicly available: <https://drc.ohio.gov/prea>

(D) Policy (79-ISA-01) requires that “any information redacted from the report due to a clear and specific threat to the safety and security of the facility must indicate the reason for redaction.” In speaking with the agency PREA Coordinator, it was noted that should the agency need to redact specific information other than publicly identifying statistics, proper procedural restraints would be applied.

Reasoning & Findings Statement:

This standard works to determine if agency, and by extension, facility base staff use aggregated data to promote the overall safety and security of the facility. In speaking with the agency-wide PREA Coordinator, PCI Operation Compliance Manager, and the PCI Warden, the manner in which person utilized the data to improve overall institutional safety, based on their role within the agency, was explained. Hence, the PCI has demonstrated clear compliance with each of the provisions, and as such, has reached the goal of the standard.

**115.89 Data storage, publication, and destruction**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Documents:

- 79-ISA-01, Prison Rape Elimination Policy, 11-15-21
- ODRC PREA Webpage
- ODRC Record Retention Schedule

Interviews:

- Agency PREA Coordinator
- PCI Facility Warden
- PCI Operation Compliance Manager

Site Review Observations:

- Extensive review of agency website/PREA section

Standard Subsections:

(A) Policy (Records Retention) requires all aggregated data to be retained permanently. The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87.

(B) Policy (Records Retention) requires all aggregated data to be retained permanently. The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. This data is made readily available

to the public through the ODRC website.

(C) Policy (79-ISA-01) requires “all personal identifiers must be removed from publicly available data,” such as all annually produced statistical reports published on the agency’s website.

(D) Policy (Records Retention) requires all aggregated data to be retained permanently. The PREA Coordinator confirms agency compliance with this directive. As well, review of the agency website reflects the collection of all annual aggregated reports previously published pursuant to §115.87. This data is made readily available to the public through the ODRC website.

**Reasoning & Findings Statement:**

This standard works to ensure both public availability and agency integrity in the presentation of aggregated sexual abuse data. In reviewing agency documents and speaking with staff, it is more than apparent that both the ODRC PREA Coordinator, as well as the administration of the PCI, operate with transparency in government. As such, the facility has clearly obtained each provision, and thus, satisfactorily achieve overall compliance.

115.401	Frequency and scope of audits
	<p data-bbox="280 188 1038 224"><b>Auditor Overall Determination:</b> Exceeds Standard</p> <hr/> <p data-bbox="280 264 580 300"><b>Auditor Discussion</b></p> <hr/> <p data-bbox="280 340 453 376">Documents:</p> <ul data-bbox="280 483 852 591" style="list-style-type: none"> <li data-bbox="280 483 687 519">• ODRC PREA Webpage</li> <li data-bbox="280 555 852 591">• ODRC Record Retention Schedule</li> </ul> <p data-bbox="280 698 437 734">Interviews:</p> <ul data-bbox="280 842 884 1164" style="list-style-type: none"> <li data-bbox="280 842 743 878">• Agency PREA Coordinator</li> <li data-bbox="280 913 647 949">• PCI Facility Warden</li> <li data-bbox="280 985 884 1021">• PCI Operation Compliance Manager</li> <li data-bbox="280 1057 708 1093">• Random/Targeted Staff</li> <li data-bbox="280 1128 775 1164">• Random/Targeted Offenders</li> </ul> <p data-bbox="280 1272 651 1308">Site Review Observations:</p> <ul data-bbox="280 1415 1273 1523" style="list-style-type: none"> <li data-bbox="280 1415 871 1451">• On-site inspection of the entire PCI</li> <li data-bbox="280 1487 1273 1523">• Review of documentation available via the ODRC PREA website</li> </ul> <p data-bbox="280 1630 600 1666">Standard Subsections:</p> <p data-bbox="280 1774 1481 1935">(A) As evidenced by presence of facility audits on the ODRC website, and confirmed by the PREA Coordinator, PREA Audits have been completed at all ODRC correctional facilities to provide for at least one-third of each facility type operated by the Agency being audited during each audit year.</p> <p data-bbox="280 2042 769 2078">(B) This is Audit Year 1 of Cycle 4.</p>

(H) The auditor had full access to all areas of the facility.

(A) All documents requested by the auditor were received in a timely manner.

(A) The auditor was permitted to conduct private interviews with inmates.

(B) Inmates were permitted to correspond with the auditor using privileged mail processes.

Reasoning & Findings Statement:

Both the PREA Coordinator and the PCI Operation Compliance Manager were exceptionally prepared for this review. The auditor was provided the PAQ well in advance of arriving to the facility. The auditor was given unrestricted access to the institution and provided with all reference materials requested. The auditor was provided with a convenient location from which to interview both employees and staff in a confidential manner. Agency staff ensured that the flow of interview traffic was never restricted and that the auditor was able to attend all requested inmate functions throughout the facility as needed. The auditor did not experience any significant barriers, at any stage of the audit, that were under the control of either the agency or the PCI. Accordingly, PCI has exceeded the provisions of this standard.

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Documents:</p> <ul style="list-style-type: none"> <li>• ODRC PREA Webpage</li> <li>• ODRC Record Retention Schedule</li> </ul> <p>Interviews:</p> <ul style="list-style-type: none"> <li>• Agency PREA Coordinator</li> </ul> <p>Site Review Observations:</p> <ul style="list-style-type: none"> <li>• Review of documentation available via the ODRC PREA website</li> </ul> <p>Standard Subsections:</p> <p>(F.)A review of the agency website reflects that the ODRC has published all final audit reports for prior audits completed during the last three years preceding this audit. The PREA Coordinator affirms that all facilities within the ODRC have been audited, and their reports subsequently published, on the agency’s website.</p> <p>Reasoning &amp; Findings Statement:</p> <p>The function of this standard is to promote transparency in government by ensuring that all facility audits are available for public review, by way of, for example, the agency’s website. In this case, the ODRC does have an agency website and has made all facility PREA reports conveniently accessible to the public.</p>

<b>Appendix: Provision Findings</b>		
<b>115.11 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.11 (c)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

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 consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need	yes

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

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

<b>115.15 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.15 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na
<b>115.15 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
<b>115.15 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

<b>115.15 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
<b>115.16 (b)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
<b>115.16 (c)</b>	<b>Inmates with disabilities and inmates who are limited English proficient</b>	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

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

<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.21 (a)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

<b>115.21 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
<b>115.21 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
<b>115.21 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
<b>115.22 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
<b>115.22 (b)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

<b>115.22 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
<b>115.31 (a)</b>	<b>Employee training</b>	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

<b>115.31 (b)</b>	<b>Employee training</b>	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
<b>115.31 (c)</b>	<b>Employee training</b>	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
<b>115.31 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
<b>115.32 (a)</b>	<b>Volunteer and contractor training</b>	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
<b>115.32 (b)</b>	<b>Volunteer and contractor training</b>	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
<b>115.32 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

<b>115.33 (a) Inmate education</b>		
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
<b>115.33 (b) Inmate education</b>		
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
<b>115.33 (c) Inmate education</b>		
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
<b>115.33 (d) Inmate education</b>		
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

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

<b>115.34 (c)</b>	<b>Specialized training: Investigations</b>	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
<b>115.35 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
<b>115.35 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes

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

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

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

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

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

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

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

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes

<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	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
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	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

<b>115.53 (a)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
<b>115.53 (b)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
<b>115.53 (c)</b>	<b>Inmate access to outside confidential support services</b>	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
<b>115.54 (a)</b>	<b>Third-party reporting</b>	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

<b>115.61 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.61 (b)</b>	<b>Staff and agency reporting duties</b>	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
<b>115.61 (c)</b>	<b>Staff and agency reporting duties</b>	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
<b>115.61 (d)</b>	<b>Staff and agency reporting duties</b>	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
<b>115.61 (e)</b>	<b>Staff and agency reporting duties</b>	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

<b>115.62 (a)</b>	<b>Agency protection duties</b>	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
<b>115.63 (a)</b>	<b>Reporting to other confinement facilities</b>	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
<b>115.63 (b)</b>	<b>Reporting to other confinement facilities</b>	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
<b>115.63 (c)</b>	<b>Reporting to other confinement facilities</b>	
	Does the agency document that it has provided such notification?	yes
<b>115.63 (d)</b>	<b>Reporting to other confinement facilities</b>	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

<b>115.64 (a)</b>	<b>Staff first responder duties</b>	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.64 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.65 (a)</b>	<b>Coordinated response</b>	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
<b>115.67 (a)</b>	<b>Agency protection against retaliation</b>	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
<b>115.67 (b)</b>	<b>Agency protection against retaliation</b>	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes

<b>115.67 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
<b>115.67 (e)</b>	<b>Agency protection against retaliation</b>	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
<b>115.68 (a)</b>	<b>Post-allegation protective custody</b>	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
<b>115.71 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
<b>115.71 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
<b>115.71 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

<b>115.71 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
<b>115.71 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
<b>115.71 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
<b>115.71 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
<b>115.71 (h)</b>	<b>Criminal and administrative agency investigations</b>	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.71 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

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

<b>115.73 (c)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (d)</b>	<b>Reporting to inmates</b>	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.73 (e)</b>	<b>Reporting to inmates</b>	
	Does the agency document all such notifications or attempted notifications?	yes

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

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

<b>115.81 (a)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
<b>115.81 (b)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
<b>115.81 (c)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
<b>115.81 (d)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
<b>115.81 (e)</b>	<b>Medical and mental health screenings; history of sexual abuse</b>	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

<b>115.82 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
<b>115.82 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.82 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
<b>115.82 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
<b>115.83 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.83 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

<b>115.83 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.83 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.83 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.83 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

<b>115.83 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
<b>115.86 (a)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
<b>115.86 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.86 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

<b>115.86 (d)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.86 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

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

<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	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
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes

<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	<p>The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)</p>	yes