

PREA Facility Audit Report: Final

Name of Facility: Morris County Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/07/2019

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" 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 checked="" type="checkbox"/>
Auditor Full Name as Signed: Candace L. Snyder	Date of Signature: 05/07/2019

AUDITOR INFORMATION	
Auditor name:	Snyder, Candy
Address:	
Email:	Snyder@gwtc.net
Telephone number:	
Start Date of On-Site Audit:	03/19/2019
End Date of On-Site Audit:	03/20/2019

FACILITY INFORMATION	
Facility name:	Morris County Juvenile Detention Center
Facility physical address:	460 West Hanover Avenue, Morris Township, New Jersey - 07960
Facility Phone	9732852959
Facility mailing address:	PO Box 900, Morristown, New Jersey - 07963
The facility is:	<input checked="" type="radio"/> County <input type="radio"/> Municipal <input type="radio"/> State <input type="radio"/> Private for profit <input type="radio"/> Private not for profit
Facility Type:	<input checked="" type="radio"/> Detention <input type="radio"/> Correction <input type="radio"/> Intake <input type="radio"/> Other <input type="text"/>

Primary Contact			
Name:	Anthony D'Alessio	Title:	Lieutenant
Email Address:	adalessio@co.morris.nj.us	Telephone Number:	9732852964

Warden/Superintendent			
Name:	Thomas Pollio	Title:	Director
Email Address:	tpollio@co.morris.nj.us	Telephone Number:	9732852965

Facility PREA Compliance Manager			
Name:	Nichele Orange	Email Address:	norange@co.morris.nj.us

Facility Health Service Administrator			
Name:	Nicole Florio	Title:	Nurse
Email Address:	nflorio@co.morris.nj.us	Telephone Number:	9734407685

Facility Characteristics	
Designed facility capacity:	42
Current population of facility:	5
Age range of population:	13 to 21
Facility security level:	Secure Facility
Resident custody level:	Orientation, Bronze, Silver, Gold
Number of staff currently employed at the facility who may have contact with residents:	43

AGENCY INFORMATION	
Name of agency:	Morris County Juvenile Detention Center
Governing authority or parent agency (if applicable):	
Physical Address:	460 West Hanover Avenue, Morris Township, New Jersey - 07960
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Anthony D'Alessio	Email Address:	adlessio@co.morris.nj.us

AUDIT FINDINGS

Narrative:

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

An audit of the Morris County Juvenile Detention Center (MCJDC) facility in Morris Township, NJ was conducted on March 19th and 20th, 2019 by Candy Snyder, a certified PREA auditor, and assisted by Mark Snyder, an auditing assistant.

An entrance meeting began with an entrance meeting with Director, Tom Pollio and the PREA Coordinator, Tony D'Alessio.

Following the entrance meeting Lt. D'Alessio accompanied the audit team on the facility tour. The auditor then began interviewing specialized staff. Suitable and private accommodations were made for the auditor to conduct interviews. The auditor was not limited in any way from speaking with staff or youth or inspecting any area of the facility. The auditor interviewed staff from all shifts. Everyone throughout the facility was professional and courteous.

The auditor conducted a review of the application and hiring process. The auditor reviewed randomly selected criminal background checks. There were no investigations to review.

Lt. D'Alessio provided a copy of the staff schedule. The auditor randomly selected nine (9) staff and conducted interviews of staff covering all shifts. The audit team stayed into the evening hours to interview staff from the overnight shift. The auditor included staff with varying degrees of longevity, diverse job classifications and staff who worked within varying areas of the facility. The auditor asked specialized questions of those line staff that perform screenings, perform searches, which supervise youth in isolation, who are first responders, and staff who conduct the intake process.

The auditor completed interviews of all twelve (12) youth present at the facility. There was one resident who is limited English speaking that was interviewed. The interpretive service, Language Line, was used to conduct the interview. There were no youth with disabilities. There were no youth who identified as LGBTI. The facility states that it does not use isolation for protective custody and this was confirmed through direct observation and through interviews. They may move a youth for a short time period while they review the situation and determine the best housing placement to keep the youth safe.

An exit briefing was held with the Director, the PREA Coordinator, the PREA Compliance Manager. The auditor provided a preliminary finding of each standard with the caveat that this was subject to change as the auditor continued to review documents, may have questions to be answered and prepares the interim report. The auditor thanked the Director and the PREA Coordinator for their hard work, their hard work yet to come, their commitment to follow the Prison Rape Elimination Act and most importantly, their dedication to and caring for the youth under their charge.

AUDIT FINDINGS

Facility Characteristics:

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

Morris County Juvenile Detention Center (MCJDC) is located in Morristown Township, New Jersey. The facility is comprised of one building and a secure outdoor recreation area. The building consists of a non-secure administrative area, secure entry, library, control room, a dayroom/dining hall, kitchen area, two classrooms, medical offices, and an intake area. There are three distinct housing units. The South housing unit has ten (10) sleeping rooms. Two of those sleeping rooms are double bunked. However, as the facility has been under-capacity for quite some time, residents are not double bunked within any sleeping room. There are two private single stall shower rooms on the south unit and a dayroom. The specialized housing unit is used for female residents. This unit has eight (8) sleeping rooms and two private single stall shower rooms. The west housing unit has 18 sleeping units. Two of those sleeping rooms are double bunked, however no residents are double bunked within a room due to the low population. All sleeping rooms within every unit are wet rooms with a combination toilet/sink within the room. Every unit has a dayroom and laundry facilities that serve that unit. Each dayroom has PREA posters in both English and Spanish with the number to contact the Division of Child Protection and Permanency (DCP&P) hotline number for reporting sexual abuse. Each dayroom also has a phone that is accessible to the youth. The auditor utilized the phone in a youth dayroom to contact the DCP&P.

AUDIT FINDINGS

Summary of Audit Findings:

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

Auditor Note: No standard should be found to be "Not Applicable" or "NA". A compliance determination must be made for each standard.

Number of standards exceeded:	0
Number of standards met:	43
Number of standards not met:	0

The PREA Coordinator has continued to ensure PREA compliance is maintained since the last audit in 2016. All of the information was provided timely. Youth and staff interviews, and document review confirmed that the Morris County Juvenile Detention Center is thoroughly committed to keeping youth safe and following the standards. Most importantly when asked, youth stated they felt safe at the Morris County Juvenile Detention Center.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCJDC has a PREA policy (PREA Implementation Policy 8.0). The PREA Coordinator is responsible for the overall coordination of the standards and the PREA Compliance Manger works directly with custody staff and youth on a day-to-day basis to ensure the policy and procedures are implemented. Both the PREA Coordinator and the PREA Compliance Manger have sufficient time to complete duties related to PREA compliance. The PREA Coordinator is very organized. He had documentation for the audit ready and waiting. The PREA Compliance Manager does a great job in assisting in all the PREA efforts to ensure compliance especially training and training documentation. Both are very well-versed in his duties and the standards. The PREA policy is posted on the facility website.

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The MCJDC does not contract with other facilities for the confinement of their residents.

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The MCJDC administration holds staffing meetings in which they discuss staffing issues, promotions and training. Their required staffing plan is outlined in Work Schedule-Staffing Levels Policy 1.8 which states that MCJDC maintain a staffing ratio of 1:8 ratio during waking hours and 1:16 ratio during sleeping hours. This requirement is also evaluated annually by the Juvenile Justice Commission during the annual review of the Manual of Standards for Juvenile Detention Facilities. The previous year's review stated that all standards were found to be in compliance, including subchapter 10.6 Staff Coverage. The facility staff review the previous year's schedule within a document that outlines the daily population for each day of the year and the number of staff present on each shift. The facility's supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment.

115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility does not conduct cross-gender strip searches, visual body cavity searches or pat searches. They have a good process for documenting in the log any exigent circumstance. In addition, staff are trained in the proper technique for cross-gender searches or searches of transgender and intersex youth. Staff and youth very clearly stated that that both pat and strip searches are conducted by staff that are the same gender as the youth being searched.</p> <p>The toilet and shower facilities are individual and private and therefore allow for residents to shower, toilet and change clothing without staff viewing them naked. Staff and youth very clearly stated that all staff announce their presence when entering a housing area of the opposing gender as the staff. Both staff and youth stated viewing is not an issue and youth have plenty of privacy. Staff were aware of the responsibility of determining sex solely through professional conversation or through medial records or through part of a broader medical examination by a medical practitioner. The resident's own views were taken into consideration as to which staff performs a search of a transgender or intersex resident.</p>

115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MCJDC has a contract with an interpretive service for residents who limited English proficient. The auditor used this service to conduct an interview with a resident who speaks Spanish. The number and instructions for this service are posted prominently on the intake desk and the Sergeant's office. The intake PREA information and the PREA posters are provided in Spanish format.</p>

115.317	<p>Hiring and promotion decisions</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The facility has performed criminal background checks at the time of employment of new hires. They have ran a criminal case history check on the New Jersey Judiciary site Promis /Gavel for any current employee who has a background check that is more than five years old or who has been recently promoted. All employees hired since August 20, 2013 has had a Child Abuse Record Information (CARI) check ran. In addition, they recently added the three PREA standard related questions during the employment process and require new hires to affirm that they have a continuing duty to report. During the review of personnel records there was not evidence of inquiry into substantiated sexual abuse for employees were newly hired who had been employed by a juvenile detention facility in a nearby county. This was discussed and the superintendent provided a county Human Resources memo that cited New Jersey Executive Order #11, which stated limited information, could be released. Therefore, they had not been asking nor providing this information as they believed this to be a legal prohibition from doing so. The auditor researched New Jersey Executive Order #11 Governor Byrne 1974 and Executive Order #21 Governor McGreevy 2002. The auditor also contacted the PREA Resource Center on guidance. The guidance given was that they do not believe that these orders prevent correctional agencies from complying with the PREA standards as it relates to providing information in the institutional reference checks about a former employee. Their rationale, based on analysis of the EOs and HR directive is that the EO places no restriction on disclosing information to any person duly authorized by this State or the United States to inspect such information in connection with his official duties. The PREA Resource Center stated they believe that the New Jersey correctional agencies are legally able to comply with the scope and intent of PREA standard 115.17(h) regarding institutional background checks.</p> <p>Following receiving the interpretation of the Executive Order the MCJDC immediately contacted the former employee of their recent new hires for institutional background checks and made assurance that they would also provide this information.</p>
---------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

115.318	<p>Upgrades to facilities and technologies</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The facility had additional areas constructed in 2000. In addition, the control room was updated with a new flat panel door system control panel in 2013. The facility is laid out to provide exceptional monitoring of youth by both direct visibility and camera monitoring. The administrators consider the ways in which to enhance their efforts and abilities to protect residents from sexual abuse through the use of electronic monitoring and video monitoring. They have camera systems in all key areas. Additionally, they have a secured entry door system that is operated by the main control. Multiple supervisory staff are able to monitor cameras in key areas.</p>
---------	-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------

115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Criminal Investigations are conducted through the Morris County Prosecutor's Office through the SART team using a coordinated response which the prosecutor's office initiates. Administrative investigations are conducted by the MCJDC PREA Coordinator.</p> <p>Youth who have been victims of sexual assault would be offered forensic exams by a Sexual Assault Nurse Examiner (SANE) at the Morristown Memorial Hospital. An advocate is arranged by the Morris County Prosecutor's office. This advocate will accompany youth to the hospital and provide emotional support and assistance throughout the forensic exam and investigatory process.</p>

115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>As soon as the administrator is notified of a sexual abuse of a criminal nature the protocol is to call both the Division of Child Protection and Permanency (DCP&P) and the Morris County Prosecutor's Office. There is a written policy that states all allegations of sexual abuse or sexual harassment are referred for investigation and this policy is posted on the MCJDC website.</p>

115.331	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MCJDC provides PREA training to all staff. The facility provided documented record of staff training. The training documentation includes receipt and acknowledgment sheet that the employee signs stating they have read and understand the PREA policy, the training on the specific points outlined in the standard. Staff consistently stated throughout the interviews that they do not treat LGBTI residents any differently than other residents, are knowledgeable of protection of evidence measures, were aware of first responder duties and were aware of reporting requirements.</p>

115.332	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCJDC provides PREA training to volunteers and contractors at a level that is dependent upon their level of contact with the youth. Teaching staff have received the same level of training as employees. Every visitor entering the facility signs an acknowledgement form that they understand the zero tolerance policy of sexual abuse and harassment. The auditor verified training through a review of documentation and interviews.

115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility provides residents initial information on the MCJDC zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment immediately upon intake. This was evident through the interviews with youth. They stated that they received some basic information immediately (during intake). The more in-depth training is provided by the Social Worker within the first 10 days through a video presentation and an opportunity to discuss and have questions answered. The auditor interviewed residents of the facility and the resident education was verified through this interview. However, the facility had recently received residents from the Union County Juvenile Detention Facility that closed. Although Union County provided the youth records to include resident education and screening, the auditor required that they re-train and re-screen these residents. The youth refused to participate in the video education because they stated they had just received training at Union JDC and did not want to watch the film again. They signed a refusal form.

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The MCJDC staff do not conduct criminal sexual abuse investigations. The allegation is turned over to the Morris County Prosecutor's Office. In addition, abuse allegations are turned over to the Department of Children & Families Institutional Abuse Investigation Unit to conduct sexual abuse investigations. Investigators from these units have received specialized training in conducting such investigations in confinement settings. The MCJDC investigator handles any non-criminal investigations. The administrative investigator provided a certificate from the National Institute of Corrections verifying participation in the on-line investigation course "Investigating Sexual Abuse in a Confinement Setting".

115.335	Specialized training: Medical and mental health care
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 1484 907">Through interviews with the nurse and the mental health staff, it is apparent they are knowledgeable in how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. No forensic examinations are conducted on site. All youth who report a sexual assault will be transported to the local hospital with SANE services. The staff verbally disclose to youth the limitations of confidentiality and their duty to report at the initiation of services. The auditor recommended that this be posted conspicuously in the medical office. The nurse has participated in the National Institute of Corrections on-line course "PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting" as well as the basic PREA training provided to all staff. The mental health staff participated in training from the National Institute of Corrections on-line course "PREA: Behavioral Health Care for Sexual Assault Victims in a Confinement Setting" as well as the basic PREA training provided to all staff.</p>

115.341	Obtaining information from residents
	<p data-bbox="252 1120 901 1153">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 1198 526 1232">Auditor Discussion</p> <p data-bbox="252 1276 1484 1601">MCJDC screens residents upon arrival. The social worker administers the screening for all incoming youth. However, MCJDC recently received youth from Union County Juvenile Detention Center. Although Union County JDC's records were provided, the auditor required that the Union County residents be re-screened. The facility immediately took action and re-screened the Union County residents. The screening documents are secured within the social worker's office. If a youth, through the screening process, is determined to be susceptible to victimization or perpetration of sexual abuse, this is shared with staff only to the extent necessary to provide for the well being of youth.</p>

115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MCJDC makes placement decisions based on all information obtained to make housing, bed, program, and education assignments for residents with the goal of keeping all residents safe and free from sexual abuse. The facility takes into account the concerns of a transgendered or intersex resident's own views with respect to his or her own safety. Those views are given serious consideration and this was demonstrated through the interviews of staff. All youth shower separately at the facility. The facility does not place lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed or other assignments solely on the basis of such identification or status, nor does the facility consider lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator of likelihood of being sexually abusive. The facility indicates through interviews that they will consider on a case-by-case basis assignment to a living unit that will ensure the resident's health and safety, and whether the placement would present management or security problems. Facility procedure is to manage a resident's room placement rather than using isolation as a means for protecting the resident's safety.</p>

115.351	Resident reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MCJDC provides multiple ways for residents to privately report sexual abuse and sexual harassment, or retaliation. They can report to any staff member either verbally or in writing. Youth are allowed at least two phone calls per week to parents or guardians. The youth may write a grievance and there are pencils and grievance forms in the housing unit. Youth are able to seal the envelope so that the grievance can remain private and anonymous and it goes directly to the Lieutenant responsible for processing grievances. Youth can call an assigned DCP&P caseworker and their lawyer. They can speak with the nurse or social worker privately at any time by simply making the request. In addition, the number to the DCP&P hotline is provided in their handbook and on posters as a means as accessing an outside reporting agency.</p> <p>Youth reported feeling very comfortable reporting directly to their staff or another person within the facility. They reported there is a grievance process available. The staff accepts reports made verbally, in writing, anonymously, and from third parties and promptly documents any verbal reports.</p>

115.352	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Residents may submit a grievance alleging sexual abuse or harassment without submitting it to a staff member that is subject of the allegation. The youth does not have to complete any other prior steps in order to submit a grievance for an allegation of sexual abuse. There is also no time limit on when a youth can submit a grievance regarding an allegation of sexual abuse. Any emergency grievances are immediately handled by the Lieutenant. Youth may have assistance in completing a grievance from another juvenile, a staff member, or third party. Staff and youth interviews confirmed their knowledge of how the grievance process can be used to report sexual abuse and sexual harassment.

115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCJDC has an MOU for advocacy services through the Morris County Sexual Assault Center (Morris Cares). MCJDC provides youth with reasonable and confidential access to their attorneys and parents. In addition, all youth interviewed reported that they had contact with their families regularly. If the youth is involved with the Department of Children and Families, they may already be assigned a Care Management worker who assists them in accessing services through Care Management Organizations (CMO's) that provide a range of treatment and support services to children.

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The MCJDC has PREA sign-in sheet located at the entry to the detention center next to the visitor sign in book. It explains PREA policy 8.0 and informs visitors regarding mandatory reporting rules and reporting information. MCJDC posts on their website how to report sexual abuse and sexual harassment on behalf of a resident. They provide contact information for the DCP&P, the Morris County Sexual Assault Center and the MCJDC Administration. https://hs.morriscountynj.gov/wp-content/uploads/2016/02/Third-Party-Reporting-PREA.pdf

115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>MCJDC requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Apart from reporting to designated supervisors or officials and designated State agency, staff are prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions. Medical and mental health practitioners are required to report sexual abuse to designated supervisors and officials as well as to the designated State service agencies.</p> <p>The facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the designated investigators. Upon receiving any allegation of sexual abuse, MCJDC staff promptly report the allegation to the DCP&P, the Morris Township Police Department, and to parents or legal guardian.</p>

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The facility requires all staff to take immediate action to protect the resident from imminent sexual abuse. There have been no instances that a resident was subject to risk of imminent sexual abuse. This was confirmed through a review of policy, documentation and interviews with the administration and staff.</p>

115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>There are procedures in place to appropriately act upon an allegation of sexual abuse reported by a resident who was housed at another facility. This notification will be made from Superintendent to Superintendent, the action will be initiated no later than 72 hours and the action will be documented. There have been no incidents that were reported by a youth later housed at another facility. Their procedures were confirmed through interviews with administrators.</p>

115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	MCJDC staff were aware of first responder procedures and were able to clearly articulate their duties. Staffs first response was primarily for the safety and well-being of the victim. They were well versed in how to preserve and protect evidence aware of most elements of this standard.

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facilities coordinated response plan is outlined in policy. The MCJDC policy outlines the steps to be take at the onset by first responders, transport to the hospital and activation of the Sexual Assault response Team (SART) through notification of the Morris Township Police Department and the Morris County Prosecutors Office. The Morris County prosecutor’s office has already set up a SART. The facility has been in contact with the prosecutor’s office and verified that the SART would respond on behalf of a victim of the MCJDC. The SART team consists of an advocate, certified forensic nurse and specially-trained law enforcement investigators that address the medical, emotional and legal needs of survivors 13 years of age and up who are in acute crisis and have been sexually assaulted within a five-day period. The youth would be transported to the hospital. Advocate services are available through Morris Cares at the Morristown Medical Center.

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	There are no barriers preventing the Superintendent from removing alleged staff, volunteer, or contractor sexual abusers from contact with residents pending the outcome of the investigation and a determination of discipline. The facility staff are represented by a union. There is nothing within the collective bargaining agreement that precludes MCJDC administration from removing an employee from contact with youth while an incident is under investigation or terminating employment after a substantiated allegation against the employee for sexual abuse.

115.367	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The retaliation monitoring procedures are included in the PREA policy. The PREA Coordinator has been assigned to monitor for retaliation. Upon each reported sexual assault or sexual harassment incident, the monitor follows up with the youth and/or staff members involved periodically for up to 90 days.

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility does not isolate victims. Victims may be placed apart from others immediately following the report of a sexual assault or sexual harassment incident only for their immediate safety while information is gathered. Reintegrating the victim into the appropriate housing following an incident is determined by a consensus of Administrative, Medical, Social Service, Education and the victim(s) themselves.

115.371	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The auditor reviewed agency investigative files. The investigators follow all standards in the course of their investigation and have received specialized training. Administrative investigations include efforts to determine whether staff actions/failures contributed to the abuse documented through written reports, which will include physical/testimonial evidence, credibility reasoning assessments and investigative facts and findings. All written reports will be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The investigators use no standard higher than a preponderance of evidence in making a determination of alleged sexual abuse/harassment. This was confirmed through the interview process and a review of the investigative files.

115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility notifies residents as to whether the allegation was substantiated, unsubstantiated or unfounded. The MCJDC uses a form to report and document the outcome of an investigation to residents.

115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	All staff members who violate sexual abuse, sexual harassment and retaliation policies are subject to disciplinary sanctions. Interviews conducted with MCJDC Administrators verified that there had been no substantiated allegations at the facility over the past reporting period. Interviews confirmed that this standard would be followed should disciplinary measures be required including a report to law enforcement and relevant licensing authorities should termination and/or resignation of staff occur.

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Any contractor or volunteer who violates sexual abuse, sexual harassment and retaliation policies are subject to disciplinary sanctions including termination of service. There have been no contractors or volunteers who have been accused of sexual misconduct.

115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	For incidents of youth-on-youth sexual abuse, sexual harassment or retaliation, administrative sanctions will be handed out following the formal disciplinary processes and applied commensurate with the level of infraction. For criminal allegations following a criminal finding of guilt for resident-on-resident sexual abuse disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed. A youth's access to general programming or education is not conditional on receiving interventions designed to address/correct underlying reasons or motivations for abuse. Discipline of a resident for sexual contact with staff occurs only upon a finding that the staff member did not consent to such contact. These practices were confirmed through interviews.

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The social worker completes a screening interview with youth within 24-hours of arrival. They report any previously unreported sexual abuse via the shift supervisor to DCP&P. In addition, medical staff conduct an assessment as well. When DCP&P is involved with the youth, as a matter of course DCP&P may assign a Care Management worker to the youth who can then evaluate and provide professional counseling services and therapy. The facility verbally obtains informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting for residents over 18 years of age. Both the social worker and on-site nursing evaluate and make referrals to the facility physician or mental health practitioner for follow-up care as necessary.

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility provides access to emergency medical and mental health services. In the event services after hours are not available by the facility nurse, or where indicated in the professional judgment of the nurse, residents would be taken to the Morristown Memorial Hospital. These services have not been used during the audit review period.

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility will require that medical and mental health evaluations and treatment are offered at no cost to sexual abuse victims and abusers. The social worker and nursing staff will work together to develop an on-going treatment plan and refer to external support services as necessary. In many instances services are accessed through the Department of Children and Families, Care Management Organizations (CMO's) that provide a range of treatment and support services to children. Once a Care Management worker is assigned, those services would follow a resident that is transferred or discharged. If a youth will be taken to the local hospital, tests for sexually transmitted infections will be offered there.

115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility conducts incident reviews that are attended by the PREA Coordinator/Investigator, Custody Lieutenants, medical staff, and the social worker. These reviews are required by policy and documented. The auditor verified this practice through policy review, interviews and a review of the documented incident reviews.

115.387	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility collects incident-based and aggregated data. In 2014 through 2018 was provided to the auditor.

115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The facility has held an annual review of data and prepared an annual report. This review was attended by all upper level managers. This annual report is posted on the agency's website. https://hs.morriscountynj.gov/wp-content/uploads/2019/01/PREA-Annual-Report-2018.pdf

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Data collected is retained via limited access and through a secure server for at least ten (10) years. The facility has completed and posted data to their website. https://hs.morriscountynj.gov/wp-content/uploads/2019/01/PREA-Annual-Report-2018.pdf

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	This is MCJDC's second audit. The auditor had complete access to the facility and was able to observe all areas of the facility. The auditor was provided numerous documents, viewed camera systems, and was allowed to interview residents and staff during all hours of operations. Confidential communication was allowed but none was received by the auditor from residents at this facility.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The first PREA audit report was completed in June 2016 and posted on the agency website. This report will be posted as well once complete.

Appendix: Provision Findings

115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	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.)	na

115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na

115.312 (b)	Contracting with other entities for the confinement of residents	
	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 residents OR the response to 115.312(a)-1 is "NO".)	na

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes

	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na

115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes

115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.313 (e)	Supervision and monitoring	
	Has the facility 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? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility 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? (N/A for non-secure facilities)	yes

115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes

115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents 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 a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes

115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

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

115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all	yes

	aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	
	Does the agency take appropriate steps to ensure that residents 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: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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 residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or	yes

	through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	
--	-------------------------------------------------------------------------------------------------------------------------------------------------	--

115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident’s safety, the performance of first-response duties under §115.364, or the investigation of the resident’s allegations?	yes

115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes

115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes

115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes

115.317 (f) Hiring and promotion decisions

Does the agency ask all applicants and employees who may have contact with residents 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 residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? yes

Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? yes

115.317 (g) Hiring and promotion decisions

Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? yes

115.317 (h) Hiring and promotion decisions

Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) yes

115.318 (a) Upgrades to facilities and technologies

If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.) yes

115.318 (b) Upgrades to facilities and technologies

If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)

yes

115.321 (a) Evidence protocol and forensic medical examinations

If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

yes

115.321 (b) Evidence protocol and forensic medical examinations

Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

yes

Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)

yes

115.321 (c) Evidence protocol and forensic medical examinations

Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? yes

Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? yes

If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? yes

Has the agency documented its efforts to provide SAFEs or SANEs? yes

115.321 (d) Evidence protocol and forensic medical examinations

Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? yes

If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? yes

Has the agency documented its efforts to secure services from rape crisis centers? yes

115.321 (e) Evidence protocol and forensic medical examinations

As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? yes

As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? yes

115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is not responsible for investigating allegations of sexual abuse.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	na
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.322 (c) Policies to ensure referrals of allegations for investigations

If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a)) yes

115.331 (a) Employee training

Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
Does the agency train all employees who may have contact with residents 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 residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
Does the agency train all employees who may have contact with residents on: The right of residents 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 residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b) Employee training

Is such training tailored to the unique needs and attributes of residents of juvenile facilities? yes

Is such training tailored to the gender of the residents at the employee's facility? yes

Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa? yes

115.331 (c) Employee training

Have all current employees who may have contact with residents received such training? yes

Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? yes

In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? yes

115.331 (d) Employee training

Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? yes

115.332 (a) Volunteer and contractor training

Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? yes

115.332 (b) Volunteer and contractor training

Have all volunteers and contractors who have contact with residents 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 residents)?

yes

115.332 (c) Volunteer and contractor training

Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?

yes

115.333 (a) Resident education

During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?

yes

During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?

yes

Is this information presented in an age-appropriate fashion?

yes

115.333 (b) Resident education

Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?

yes

Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?

yes

Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?

yes

115.333 (c) Resident education

Have all residents received such education? yes

Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility? yes

115.333 (d) Resident education

Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient? yes

Does the agency provide resident education in formats accessible to all residents including those who: Are deaf? yes

Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired? yes

Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled? yes

Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills? yes

115.333 (e) Resident education

Does the agency maintain documentation of resident participation in these education sessions? yes

115.333 (f) Resident education

In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats? yes

115.334 (a) Specialized training: Investigations

In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received 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 115.321(a).) yes

115.334 (b) Specialized training: Investigations

Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(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 115.321(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 115.321(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 115.321(a).) yes

115.334 (c) Specialized training: Investigations

Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).) yes

115.335 (a) Specialized training: Medical and mental health care

Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? 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? 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 juvenile victims of sexual abuse and sexual harassment? 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? yes

115.335 (b) Specialized training: Medical and mental health care

If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) yes

115.335 (c) Specialized training: Medical and mental health care

Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? yes

115.335 (d) Specialized training: Medical and mental health care

Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? yes

Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? yes

115.341 (a) Obtaining information from residents

Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident? yes

Does the agency also obtain this information periodically throughout a resident's confinement? yes

115.341 (b) Obtaining information from residents

Are all PREA screening assessments conducted using an objective screening instrument? yes

115.341 (c) Obtaining information from residents

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability? yes

During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents? yes

115.341 (d) Obtaining information from residents

Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings? yes

Is this information ascertained: During classification assessments? yes

Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files? yes

115.341 (e) Obtaining information from residents

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 resident's detriment by staff or other residents? yes

115.342 (a) Placement of residents

Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments? yes

Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments? yes

Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments? yes

Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments? yes

Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments? yes

115.342 (b) Placement of residents

Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged? yes

During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise? yes

During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services? yes

Do residents in isolation receive daily visits from a medical or mental health care clinician? yes

Do residents also have access to other programs and work opportunities to the extent possible? yes

115.342 (c) Placement of residents

Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status? yes

Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status? yes

Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status? yes

Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive? yes

115.342 (d) Placement of residents

When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents 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 residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?

yes

115.342 (e) Placement of residents

Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?

yes

115.342 (f) Placement of residents

Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?

yes

115.342 (g) Placement of residents

Are transgender and intersex residents given the opportunity to shower separately from other residents?

yes

115.342 (h) Placement of residents

If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)

na

If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)

na

115.342 (i) Placement of residents

In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? yes

115.351 (a) Resident reporting

Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? yes

115.351 (b) Resident reporting

Does the agency also provide at least one way for residents 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 resident reports of sexual abuse and sexual harassment to agency officials? yes

Does that private entity or office allow the resident to remain anonymous upon request? yes

Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment? yes

115.351 (c) Resident reporting

Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? yes

Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? yes

115.351 (d) Resident reporting

Does the facility provide residents with access to tools necessary to make a written report? yes

115.351 (e) Resident reporting

Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents? yes

115.352 (a) Exhaustion of administrative remedies

Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident 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. no

115.352 (b) Exhaustion of administrative remedies

Does the agency permit residents 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 resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) yes

115.352 (c) Exhaustion of administrative remedies

Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

yes

Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

yes

115.352 (d) Exhaustion of administrative remedies

Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)

yes

If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident 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 resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)

yes

115.352 (e) Exhaustion of administrative remedies

Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents 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 residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, 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 resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)

yes

Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)

yes

If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)

yes

115.352 (f) Exhaustion of administrative remedies

Has the agency established procedures for the filing of an emergency grievance alleging that a resident 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 a resident 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 resident 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

115.352 (g) Exhaustion of administrative remedies

If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)

yes

115.353 (a) Resident access to outside confidential support services and legal representation

Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible 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? yes

Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible? yes

115.353 (b) Resident access to outside confidential support services and legal representation

Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? yes

115.353 (c) Resident access to outside confidential support services and legal representation

Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse? yes

Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? yes

115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive 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 they receive regarding retaliation against residents 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 they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes

115.361 (c) Staff and agency reporting duties

Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? yes

115.361 (d) Staff and agency reporting duties

Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws? yes

Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services? yes

115.361 (e) Staff and agency reporting duties

Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office? yes

Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified? yes

If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.) yes

If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation? yes

115.361 (f) Staff and agency reporting duties

Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? yes

115.362 (a) Agency protection duties

When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident? yes

115.363 (a) Reporting to other confinement facilities

Upon receiving an allegation that a resident 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

Does the head of the facility that received the allegation also notify the appropriate investigative agency? yes

115.363 (b) Reporting to other confinement facilities

Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? yes

115.363 (c) Reporting to other confinement facilities

Does the agency document that it has provided such notification? yes

115.363 (d) Reporting to other confinement facilities

Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? yes

115.364 (a) Staff first responder duties

Upon learning of an allegation that a resident 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 a resident 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 a resident 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 a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? yes

115.364 (b) Staff first responder duties

If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? yes

115.365 (a) Coordinated response

Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? yes

115.366 (a) Preservation of ability to protect residents from contact with abusers

Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? yes

115.367 (a) Agency protection against retaliation

Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff? yes

Has the agency designated which staff members or departments are charged with monitoring retaliation? yes

115.367 (b) Agency protection against retaliation

Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services? yes

115.367 (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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents 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 resident 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: Resident 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: Resident program changes? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff? yes

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? yes

115.367 (d) Agency protection against retaliation

In the case of residents, does such monitoring also include periodic status checks? yes

115.367 (e) Agency protection against retaliation

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? yes

115.368 (a) Post-allegation protective custody

Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342? yes

115.371 (a) Criminal and administrative agency investigations

When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).) yes

Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).) yes

115.371 (b) Criminal and administrative agency investigations

Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334? yes

115.371 (c) Criminal and administrative agency investigations

Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? yes

Do investigators interview alleged victims, suspected perpetrators, and witnesses? yes

Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? yes

- 115.371 (d) Criminal and administrative agency investigations**
- Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation? yes
- 115.371 (e) Criminal and administrative agency investigations**
- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? yes
- 115.371 (f) Criminal and administrative agency investigations**
- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff? yes
- Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? yes
- 115.371 (g) Criminal and administrative agency investigations**
- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? yes
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? yes
- 115.371 (h) Criminal and administrative agency investigations**
- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? yes

115.371 (i)	Criminal and administrative agency investigations	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.371 (m)	Criminal and administrative agency investigations	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.373 (b) Reporting to residents

If the agency did not conduct the investigation into a resident'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 resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) yes

115.373 (c) Reporting to residents

Following a resident'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 posted within the resident's unit? yes

Following a resident'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 a resident'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 a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? yes

115.373 (d) Reporting to residents

Following a resident's allegation that he or she has been sexually abused by another resident, 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 a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? yes

115.373 (e) Reporting to residents

Does the agency document all such notifications or attempted notifications? yes

115.376 (a) Disciplinary sanctions for staff

Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? yes

115.376 (b) Disciplinary sanctions for staff

Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? yes

115.376 (c) Disciplinary sanctions for staff

Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? yes

115.376 (d) Disciplinary sanctions for staff

Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies, unless the activity was clearly not criminal? yes

Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? yes

115.377 (a) Corrective action for contractors and volunteers

Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents? yes

Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? yes

Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? yes

115.377 (b) Corrective action for contractors and volunteers

In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents? yes

115.378 (a) Interventions and disciplinary sanctions for residents

Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process? yes

115.378 (b) Interventions and disciplinary sanctions for residents

Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories? yes

In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise? yes

In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services? yes

In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician? yes

In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible? yes

115.378 (c) Interventions and disciplinary sanctions for residents

When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior? yes

115.378 (d) Interventions and disciplinary sanctions for residents

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 offer the offending resident participation in such interventions? yes

If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education? yes

- 115.378 (e) Interventions and disciplinary sanctions for residents**
- Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact? yes
- 115.378 (f) Interventions and disciplinary sanctions for residents**
- For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? yes
- 115.378 (g) Interventions and disciplinary sanctions for residents**
- Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.) yes
- 115.381 (a) Medical and mental health screenings; history of sexual abuse**
- If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? yes
- 115.381 (b) Medical and mental health screenings; history of sexual abuse**
- If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? yes

115.381 (c) Medical and mental health screenings; history of sexual abuse

Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? yes

115.381 (d) Medical and mental health screenings; history of sexual abuse

Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18? yes

115.382 (a) Access to emergency medical and mental health services

Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? yes

115.382 (b) Access to emergency medical and mental health services

If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362? yes

Do staff first responders immediately notify the appropriate medical and mental health practitioners? yes

115.382 (c) Access to emergency medical and mental health services

Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? yes

115.382 (d) Access to emergency medical and mental health services

Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? yes

115.383 (a) Ongoing medical and mental health care for sexual abuse victims and abusers

Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? yes

115.383 (b) Ongoing medical and mental health care for sexual abuse victims and abusers

Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? yes

115.383 (c) Ongoing medical and mental health care for sexual abuse victims and abusers

Does the facility provide such victims with medical and mental health services consistent with the community level of care? yes

115.383 (d) Ongoing medical and mental health care for sexual abuse victims and abusers

Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) yes

- 115.383 (e) Ongoing medical and mental health care for sexual abuse victims and abusers**
- If pregnancy results from the conduct described in paragraph § 115.383(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.) yes
- 115.383 (f) Ongoing medical and mental health care for sexual abuse victims and abusers**
- Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? yes
- 115.383 (g) Ongoing medical and mental health care for sexual abuse victims and abusers**
- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? yes
- 115.383 (h) Ongoing medical and mental health care for sexual abuse victims and abusers**
- Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? yes
- 115.386 (a) Sexual abuse incident reviews**
- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? yes

115.386 (b)	Sexual abuse incident reviews	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
		Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
		Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
		Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
		Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
		Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d) (1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.387 (a)	Data collection	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.387 (c)	Data collection	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.387 (f)	Data collection	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	na

115.388 (a) Data review for corrective action

Does the agency review data collected and aggregated pursuant to § 115.387 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 § 115.387 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 § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? yes

115.388 (b) Data review for corrective action

Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse? yes

115.388 (c) Data review for corrective action

Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? yes

115.388 (d) Data review for corrective action

Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? yes

115.389 (a) Data storage, publication, and destruction

Does the agency ensure that data collected pursuant to § 115.387 are securely retained? yes

115.389 (b) Data storage, publication, and destruction

Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? yes

115.389 (c) Data storage, publication, and destruction

Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? yes

115.389 (d) Data storage, publication, and destruction

Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? yes

115.401 (a) Frequency and scope of audits

During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) yes

115.401 (b) Frequency and scope of audits

Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.) no

If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) 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.) yes

115.401 (h) Frequency and scope of audits

Did the auditor have access to, and the ability to observe, all areas of the audited facility? yes

115.401 (i) Frequency and scope of audits

Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? yes

115.401 (m) Frequency and scope of audits

Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? yes

115.401 (n) Frequency and scope of audits

Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? yes

115.403 (f) Audit contents and findings

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A only if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.)

yes