

# PREA Facility Audit Report: Final

**Name of Facility:** Juneau County Jail

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 09/20/2022

**Date Final Report Submitted:** 03/07/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Dave Andraska	<b>Date of Signature:</b> 03/07/2023

AUDITOR INFORMATION	
<b>Auditor name:</b>	Andraska, Dave
<b>Email:</b>	ddafalls@hotmail.com
<b>Start Date of On-Site Audit:</b>	07/19/2022
<b>End Date of On-Site Audit:</b>	07/20/2022

FACILITY INFORMATION	
<b>Facility name:</b>	Juneau County Jail
<b>Facility physical address:</b>	200 Oak Street, Mauston, Wisconsin - 53948
<b>Facility mailing address:</b>	

<b>Primary Contact</b>	
<b>Name:</b>	Colleen Beier
<b>Email Address:</b>	cbeier@co.juneau.wi.us
<b>Telephone Number:</b>	608-847-9416

<b>Warden/Jail Administrator/Sheriff/Director</b>	
<b>Name:</b>	Colleen Beier
<b>Email Address:</b>	cbeier@co.juneau.wi.us
<b>Telephone Number:</b>	608-847-9416

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	157
<b>Current population of facility:</b>	100
<b>Average daily population for the past 12 months:</b>	83
<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>Which population(s) does the facility hold?</b>	Both females and males
<b>Age range of population:</b>	20-60
<b>Facility security levels/inmate custody levels:</b>	Min/Med/Max
<b>Does the facility hold youthful inmates?</b>	No
<b>Number of staff currently employed at the facility who may have contact with inmates:</b>	53
<b>Number of individual contractors who have contact with inmates, currently authorized to enter the facility:</b>	0
<b>Number of volunteers who have contact with inmates, currently authorized to enter the facility:</b>	5

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Juneau County Sheriff's Office
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	200 Oak Street, Mauston, Wisconsin - 53948
<b>Mailing Address:</b>	
<b>Telephone number:</b>	6088475649

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	Brent Oleson
<b>Email Address:</b>	jusosheriff@co.juneau.wi.us
<b>Telephone Number:</b>	608-847-5649

<b>Agency-Wide PREA Coordinator Information</b>			
<b>Name:</b>	Colleen Beier	<b>Email Address:</b>	cbeier@co.juneau.wi.us

<b>SUMMARY OF AUDIT FINDINGS</b>	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
<b>Number of standards exceeded:</b>	
0	
<b>Number of standards met:</b>	
45	
<b>Number of standards not met:</b>	
0	

## POST-AUDIT REPORTING INFORMATION

# GENERAL AUDIT INFORMATION

### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-07-19
2. End date of the onsite portion of the audit:	2022-07-20

### Outreach

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

# AUDITED FACILITY INFORMATION

14. Designated facility capacity:	157
15. Average daily population for the past 12 months:	83
16. Number of inmate/resident/detainee housing units:	13
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

<b>36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	100
<b>38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:</b>	1
<b>39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:</b>	0
<b>42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:</b>	0

<p><b>43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>3</p>
<p><b>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>0</p>
<p><b>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</b></p>	<p>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</b></p>	<p>53</p>

<p><b>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>5</p>
<p><b>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</b></p>	<p>5</p>
<p><b>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</b></p>	<p>No text provided.</p>

## INTERVIEWS

### Inmate/Resident/Detainee Interviews

#### Random Inmate/Resident/Detainee Interviews

<p><b>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>12</p>
<p><b>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p> <input type="checkbox"/> Age  <input checked="" type="checkbox"/> Race  <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic)  <input type="checkbox"/> Length of time in the facility  <input checked="" type="checkbox"/> Housing assignment  <input checked="" type="checkbox"/> Gender  <input type="checkbox"/> Other  <input type="checkbox"/> None </p>



<b>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	As this facility is a county jail, inmates were chosen from each living unit including the Restrictive Housing Unit
<b>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	4
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<b>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</b>	1

<p><b>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator and medical staff reviewed health screening on all inmates to determine any that met the criteria for a targeted population.</p>
<p><b>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator and medical staff reviewed health screening on all inmates to determine any that met the criteria for a targeted population.</p>
<p><b>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator and medical staff reviewed health screening on all inmates to determine any that met the criteria for this targeted population.</p>
<p><b>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator confirmed there were no inmates that met the criteria for this targeted population.</p>
<p><b>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator and intake staff confirmed there were no inmates that met the criteria for this targeted population.</p>
<p><b>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, the PREA Coordinator and intake staff confirmed there were no inmates that met the criteria for this targeted population.</p>
<p><b>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Prior to the selection of residents, Investigative files were reviewed and the PREA Coordinator confirmed there were no inmates that met the criteria for this targeted population.</p>
<p><b>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</b></p>	<p>3</p>

<p><b>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</b></p>	<p>0</p>
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<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
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<p><b>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</b></p>	<p>Discussion with the PREA Coordinator, staff and observation confirmed there were no inmates that met the criteria for this targeted population.</p>
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<p><b>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>No text provided.</p>
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## **Staff, Volunteer, and Contractor Interviews**

### **Random Staff Interviews**

<p><b>71. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>12</p>
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<p><b>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</b></p>	<p>No text provided.</p>
<p><b>Specialized Staff, Volunteers, and Contractor Interviews</b></p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p><b>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b></p>	<p>12</p>
<p><b>76. Were you able to interview the Agency Head?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<b>78. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>79. Were you able to interview the PREA Compliance Manager?</b>	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)



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

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

	<input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
<b>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of VOLUNTEERS who were interviewed:</b>	2
<b>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
<b>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	2
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<b>83. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	No text provided.
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# SITE REVIEW AND DOCUMENTATION SAMPLING

## Site Review

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

<b>84. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
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### Was the site review an active, inquiring process that included the following:

<b>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
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<b>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
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<p><b>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>88. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</b></p>	<p>During the site review, this auditor verified the cross-gender announcements were made by staff when entering Resident rooms. This auditor verified that notice of audit was posted, PREA information and signage was posted and inspected all areas for blind spots and cross-gender viewing capabilities.</p>
<p><b>Documentation Sampling</b></p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p><b>90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>During the on-site review this auditor reviewed employee files for PREA questions, criminal history checks, and reference checks. The auditor reviewed employee training files for initial and annual PREA training. This auditor reviewed one investigative file, and resident files for initial intake screenings, 30-day reassessments, initial PREA information at intake, and comprehensive PREA education.</p>

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

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

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

### **Sexual Abuse Investigation Outcomes**

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

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

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

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

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

**Sexual Harassment Investigation Outcomes**

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

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

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

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

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

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

### **Sexual Abuse Investigation Files Selected for Review**

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

0

**a. Explain why you were unable to review any sexual abuse investigation files:**

No allegations were reported.



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

<p><b>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
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<p><b>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
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<p><b>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
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**Staff-on-inmate sexual abuse investigation files**

<p><b>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
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<p><b>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
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<p><b>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
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**Sexual Harassment Investigation Files Selected for Review**

<p><b>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
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<p><b>a. Explain why you were unable to review any sexual harassment investigation files:</b></p>	<p>No allegations reported.</p>
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<p><b>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
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**Inmate-on-inmate sexual harassment investigation files**

<p><b>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
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<p><b>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p><b>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>Staff-on-inmate sexual harassment investigation files</b></p>	
<p><b>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
<p><b>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b></p>	<p>No text provided.</p>

# SUPPORT STAFF INFORMATION

## DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

Yes

No

## Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

Yes

No

# AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

## **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.

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail Pre-Audit Questionnaire (PAQ) responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. Juneau County Sheriff's Office Organizational Chart</li> <li>e. Juneau County Sheriff's Office Website: <a href="https://www.co.juneau.wi.gov/jail-division.html">https://www.co.juneau.wi.gov/jail-division.html</a></li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.11(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct Sexual in support of their compliance with this standard in its PAQ responses. This is a written 11 page policy that mandates zero tolerance toward sexual abuse and sexual harassment. Policy G2.20, establishes "The JCSO strives to protect inmates from sexual abuse/harassment, and provides guidelines for inmates and staff to ensure such incidents are reported, investigated, and addressed. The JCSO maintains a zero tolerance policy toward sexual abuse/harassment."</p> <p>Policy G2.20 also includes several major elements. These elements include: 1. Prevention Planning; 2. Detection; and 3. Responding. The Policy elaborates on these three "major elements" throughout the policy: Section 1 further establishes expectations regarding prevention to include screening, employee training and inmate education; Section 2 provides protocol for detection, reporting, investigation, discipline and prosecution of allegations. Additionally, Policy G2.20 includes definitions of prohibited behaviors, to include: inmate on inmate sexual abuse, inmate on inmate sexual harassment, sexual contact, sexual intercourse, staff on inmate sexual abuse, staff on inmate sexual penetration, staff on inmate sexual contact, staff on inmate voyeurism and staff on inmate sexual harassment. Juneau County Sheriff's Office is in the process of converting their policies utilizing Lexipol. As a result, the facility currently has two PREA policies. Policy 1001: Prison Rape Elimination states in Section 1001.1, "This policy provides guidance for complying with the Prison Rape Elimination Act of 2003 (PREA) and the implementing regulation that establishes standards (PREA Rule) to prevent, detect and respond to sexual abuse, harassment and retaliation against detainees in the Juneau County Sheriff's Office. Section 1001.2 establishes, "The Juneau County Sheriff's Office has zero tolerance toward all forms of sexual abuse and sexual harassment. The Office will not tolerate retaliation against</p>

any person who reports sexual abuse or sexual harassment or who cooperates with a sexual abuse or sexual harassment investigation." Juneau County Sheriff's Office has an agency website (<https://www.co.juneau.wi.gov/jail-division.html>) and has a page dedicated to the posting of PREA-related information.

115.11(b):

During the pre-onsite portion of this audit, the Facility acknowledged compliance in this provision in its PAQ response. The facility reported the Jail Administrator is the PREA Coordinator. Policy G2.20, defines the PREA Coordinator as; Employee who develops, implements, and oversees the agency's efforts to comply with the PREA standards. The agency's organizational chart reveals that the Jail Administrator/PREA Coordinator reports directly to the Under Sheriff. Policy 1001, Section 1001.3 establishes, "The Sheriff shall appoint an upper-level manager with sufficient time and authority to develop, implement and oversee office efforts to comply with PREA standards in the Juneau County Sheriff's Office." The policy also lists the responsibilities of the PREA Coordinator.

During the onsite portion of this audit, the auditor interviewed the PREA Coordinator. In response to whether she felt that she had enough time to manage all PREA-related responsibilities. The PREA Coordinator responded: "yes, PREA is a priority". The PREA Coordinator reported that she would identify what is causing the non-compliance and develop a corrective action designed to rectify it. She further elaborated that if it was a resource issue, he would explain the issue and need to the Sheriff. If a policy and procedure update is needed, all applicable personnel would receive retraining.

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

<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Juneau County Sheriff</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plan</li> </ol> </li> </ol> <p>Findings:</p> <p>115.12(a)-(c):</p> <p>During the pre-onsite portion of this audit, the Facility on behalf of Juneau County Sheriff's Office reported in PAQ responses that they are a public agency that does not contract for the confinement of its Inmates with private agencies or other entities, including other government agencies. During the onsite portion of this audit, this auditor interviewed the Juneau County Sheriff' to review the information provided by the facility in its PAQ responses. The Sheriff corroborated the information provided and informed the auditor that the Juneau County Sheriff's Office does not contract with other facilities to provided services for them and, further, has not entered into any contract for the confinement of its Inmates since August 20, 2012. The Sheriff did indicate that the Jail houses inmates for other agencies and contracts are established with PREA requirements.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is fully compliant with all provisions of this standard.</p>



<b>115.13</b>	<b>Supervision and monitoring</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. JCSO Policy 606 Prison Rape Elimination Act</li> <li>e. Logs of Unannounced rounds</li> <li>f. JSCO Policy 224 Staffing</li> <li>g. 2022 annual Staffing Plan Review</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.13(a) &amp; (c):</p> <p>During the pre-onsite portion of this audit, the Facility indicated compliance with this provision in its PAQ responses. The Facility provided this auditor with its Staffing Plan. The facility provided that the average daily population was 83 inmates. The facility further provided the average daily population of 83 on which the staffing plan was predicated. The PREA Coordinators responsibilities per Policy 1001, Section 1001.3(c) states, "Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, in order to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year."</p> <p>During the on-site portion of this audit, this auditor interviewed the agency Jail Administrator (also the PREA Coordinator). The PREA Coordinator indicated that the facility has a staff plan. The staffing plan considers the physical layout of the facility, the composition of the Inmate population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and other relevant factors. The PREA Coordinator further reported that a staff scheduled based on the staffing pattern is posted and monitored for compliance. When asked if the staffing plan is reviewed annually and documented, the PREA Coordinator responded by informing this auditor that the staffing plan annual review is not documented, but it is reviewed by an ongoing order for staffing from the Sheriff since opening.</p> <p>115.13(b):</p> <p>During the pre-onsite portion of this audit, the Facility indicated that this provision was not applicable. The facility reported that there had been no deviations from the plan. According to interviews with the Jail Administrator, the jail complies with the staffing pattern. Positions are filled with overtime or staff are held over until they can</p>

be replaced.

115.13(d):

During the pre-onsite portion of this audit, the Facility indicated that it does not have a policy or practice requires intermediate-level or higher-level supervisors to conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Such policy and practice shall be implemented for night shifts as well as day shifts. Each agency shall have a policy to prohibit 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.

**Corrective Action Needed:**

1. Develop a procedure to annually review and assess whether adjustments are needed to the staffing .plan The reviewed shall be documented and signed and dated by the PREA Coordinator.
2. Revise PREA policy to require that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The rounds should be documented.

**Final Audit Report Reassessment:**

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 606 Prison Rape Elimination Act. This is a new policy that was developed and implemented and it addresses unannounced rounds by intermediate or higher level staff to identify and deter staff sexual abuse and sexual harassment and requires that the rounds should be documented.Documentation of completed rounds by Captain was also provided. The Agency also provided the auditor with Policy 224 Staffing. This is a new policy that was developed and implemented and it addresses staffing and annual review of the staffing plan. The 2022 annual Staffing Plan Review was submitted and meets the requirements of this standard.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.14</b>	<b>Youthful inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Juneau County Sheriff</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plan</li> </ol> </li> </ol> <p>Findings:  115.14(a)-(c):  During the pre-onsite portion of this audit, the Facility on behalf of Juneau County Sheriff's Office reported in PAQ responses indicated this standard is non applicable as they do not house youthful offenders. During the onsite portion of this audit, this auditor interviewed the Juneau County Sheriff' to review the information provided by the facility in its PAQ responses. The Sheriff corroborated the information provided and informed the auditor that the Juneau County Sheriff's Office does not house youthful offenders.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is fully compliant with all provisions of this standard.</p>

<b>115.15</b>	<b>Limits to cross-gender viewing and searches</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20, Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. JCSO Policy J4.11A, Prisoner Searches</li> <li>e. JCSO Policy J4.12, Searches of Huber Inmates</li> <li>f. Staffing Training Rosters</li> <li>g. JCSO Policy 807 Inmate Hygiene</li> <li>h. Documentation regarding camera views</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Random Inmates</li> <li>c. Jail Administrator/PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.15(a):</p> <p>During the pre-onsite portion of this audit, the Facility indicated compliance with this provision in its PAQ responses and reported the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of Inmates and these types of searches are covered in policy. The Facility provided this auditor Policy J4.11A. This policy establishes, "Strip searches shall be conducted by a deputy of the same sex as the inmate. A Physician, Physician's Assistant, or a Registered Nurse licensed to practice in the State of Wisconsin will conduct body cavity searches. Deputies shall not conduct a Body Cavity Search."</p> <p>The facility indicated that over the past 12 months, there has not been any cross-gender strip or cross-gender visual body cavity searches of Inmates. During the on-site portion of this audit, this auditor was informed that there was no cross-gender strip or cross-gender visual body cavity search logs to review. To corroborate the information provided in the PAQ (that there have been no cross-gender strip or visual body cavity searches conducted), this auditor asked all random Inmates whether they had been or know of another Inmate that had been the subject of a strip search or visual body cavity search by a staff person of the opposite gender. All Inmates responded that strip searches were done in private by a staff member of the same sex as the inmate. No reported that they were subject to a body cavity search. All staff interviewed reported that they were not allowed to conduct body cavity searches and strip searches are conducted by staff of the same sex as the inmate. They further informed this auditor that they were not aware of any instance when a cross-gender strip search was performed.</p>

115.15(b):

The Facility provided this auditor Policy J4.11A. This policy establishes, "A deputy of the same sex as the inmate shall conduct a custodial (pat down) search except in emergencies or in instances when the female deputy is unavailable. Opposite-sex custodial searches should be done with a witness present."

Per the PAQ, in the past 12 months there was no cross-gender pat down of female inmates conducted during this audit period. Interviews with random female inmates revealed that pat searches were always conducted by female staff and that their ability to attend programming or other out of cell activities was not limited in any way due to the lack of female staff. Per an interview with the PREA Coordinator, she confirmed that there are always female staff members on duty at the facility.

115.15(c):

As indicated in provisions (a) and (b) above, there have been no cross-gender strip searches, cross-gender visual body cavity searches, nor cross-gender pat-down searches of female inmates. There were no logs or documentation to review.

115.15(d):

The Facility provided this auditor Policy 1001. This policy prohibits Staff on Inmate voyeurism. It defines voyeurism as an invasion of an inmate's privacy by staff for reasons unrelated to official duties, such as peering at an inmate using a toilet; requiring an inmate to expose his buttocks, genitals, or breast; or taking images of all or part of an inmate's naked body or of an inmate performing bodily functions. There are no policies and procedures that require staff of the opposite gender to announce their presence when entering an inmate housing unit.

During the onsite portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator stated although there are no policies that require staff of the opposite gender to announce their presence when entering an inmate housing unit it is covered in staff training. She further explained all inmates have been notified that at all times the Jail has male and female staff on duty and may be in view of their individual cells, dorm, day rooms including bathrooms. It should be noted that all housing pods (except the Huber area) have glass fronts that allow staff to view into the pods from the hallway. During the onsite portion of this audit, this auditor interviewed 16 Inmates and 12 random staff. A majority of the Inmates interviewed reported some staff announce their presence prior to entering a pod but all would announce if entering a cell or bathroom.. Additionally, all 16 Inmates reported that they have never been or have seen any other Inmate be naked in full view of staff, generally, regardless of gender. This auditor also made observations and engaged informal conversations with Inmates and staff while conducting the facility tour. All shower stalls had curtains. During review of the camera system it was noted that various cells did not have the toilet blocked out. Staff interviewed reported that although not required they announce their presence when entering an Inmate's cell or when entering the bathroom or shower area. . Likewise, all 12 staff reported that Inmates are able to dress, shower, and toilet without being viewed by staff of the opposite gender.

115.15(e):

The Facility provided this auditor with Policy J4.11A. The Policy establishes, "No transgender or intersex inmate shall be searched or examined for the sole purpose of determining their genital status. If the individual's genital status is unknown, it may be determined during conversations with the person, by reviewing medical records, if applicable, or as a result of a broader medical examination conducted by a Physician, Physician's Assistant, or a Registered Nurse that is licensed to practice in Wisconsin."

During the onsite portion of this audit, this auditor conducted random staff interviews. All staff reported that they are prohibited from searching or physically examining a transgender or intersex Inmate for the sole purpose of determining the Inmate's genital status. The facility reported that there were no transgender or intersex Inmates residing in the program on the first day of the audit. This audit attempted to verify that by asking staff whether or not they were aware of a current Inmate in the facility that identified as either transgender or intersex to which this auditor was told there were not any present.

115.15(f):

The Facility provided this auditor with Policy J4.11A. This search Policy establishes in section H(1), "Annual Training-Each deputy assigned to work in the Juneau County Jail shall be trained on this policy at time of hire and, at a minimum, one time annually. In addition each deputy shall be required to pass a written test on this policy."

During the pre-onsite portion of this audit, the Facility indicated that 100% of its staff is trained on conducting cross-gender pat-down searches and searches of transgender and intersex Inmates in a professional and respectful manner, consistent with security needs. During the onsite portion of this audit, this auditor interviewed random staff. All staff identified that upon hire and annually, they receive training on conducting searches.. A review of staff training records revealed that all staff had completed this training annually.

**Corrective Action Needed:**

1. Establish policy and or procedure to ensure inmates are enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks.
2. Digitally block camera views of toilets in inmate cells.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 807 Inmate Hygiene. This policy was revised to address inmate privacy when showering, changing clothes and using the toilets. The agency provided documentation the camera in cells with views of toilets were digitally blocked.

Based upon the review and analysis of all the available evidence, the auditor has

	<p>determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.</p>
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<p><b>115.16</b></p>	<p><b>Inmates with disabilities and inmates who are limited English proficient</b></p>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b. JSCO Policy 1001: Prison Rape Elimination</li> <li>c. JSCO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator/PREA Coordinator</li> <li>b. Random Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.16(a)-(b):</p> <p>During the pre-onsite portion of this audit, the Facility provided this auditor with Policy 1001 and indicated compliance with this provision. Policy 1001, section 1001.3(g) establishes, “Ensuring that detainees with limited English proficiency and disabilities have an equal opportunity to understand and benefit from efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes, as appropriate, access to interpreters and written materials in formats or through methods that provide effective communication to those with disabilities (e.g., limited reading skills, intellectual, hearing or vision disabilities).”</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff. The Sheriff reported that the Juneau County Jail has established procedures to provide Inmates with disabilities and Inmates who are limited English proficient 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. The auditor interviewed one inmate that was in a wheelchair, he indicated he had no issues at the facility.</p> <p>.</p> <p>On the first day of the onsite portion of this audit, the facility indicated no Inmates were present in the facility that were identified as blind, deaf, or hard of hearing; who are limited English proficient; or with a cognitive disability. In review of the facility characteristics and make up of current population, it was revealed that this facility only occasionally services Inmates that are limited English proficient. When questioned whether the facility has materials available in other languages, the PREA Coordinator (and other staff I interviews) reported that there are staff that can speak Spanish they can utilize a translation service. Most forms are available in Spanish.</p> <p>.</p> <p>115.16(c):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this</p>	



provision and provided this auditor with Policy 1001 and indicated compliance with this provision. Policy 1001, section 1001.3(g)(1) establishes “The agency shall not rely on other detainees for assistance except in limited circumstances where an extended delay in obtaining an interpreter could compromise the detainee’s safety, the performance of first-response duties under this policy, or the investigation of a detainee’s allegations of sexual abuse, harassment or retaliation.” The facility indicated that they would document the use of Inmate interpreters but reported that the facility has not utilized Inmate interpreters, readers, or any other type of Inmate assistants over the past 12 months. During the onsite portion of this audit, this auditor interviewed random staff. Staff reported that use of Inmate interpreters would not be used to assist other Inmates with limited English proficiency when making an allegation of sexual abuse or sexual harassment unless no other options are immediately available.

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

<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. Background Investigation - Investigator Contact Log</li> <li>e. Personnel files or persons hire or promoted in the past 12 months</li> <li>f. Application for Employment</li> <li>g. JCSO Policy 305 Recruitment and Selection</li> <li>h. JCSO Policy 107 Special Assignments and Promotions</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Juneau County Human Resources Director</li> <li>b. Staff that complete criminal background checks</li> <li>c. PREA Coordinator/Jail Administrator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.17(a-b):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with these provisions. This auditor reviewed the Agency’s PREA Policies and they did not include language that prohibits hiring or promoting staff engaging in sexual abuse as required by Provision (a) of this standard. The policies did not contain language regarding the hiring or promoting staff regarding incidents of sexual harassment per provision (b) of this standard.</p> <p>The Juneau County Personnel Department has oversight of the hiring procedures and delegates certain responsibilities and duties to the Juneau County Sheriff’s Office.</p> <p>During the onsite portion of this audit, this auditor interviewed Human Resources Director. Her office maintains the personnel files for all county employees. She indicated, a criminal background check is completed by a Lieutenant in the Sheriff’s Office. Applicants that have these types of criminal history won’t be considered for employment. She was not aware if the Agency had a policy that was specific to this PREA standard. During the onsite portion of this audit, this auditor conducted four random personnel file reviews. The files contained both a state and national criminal background check along with a driver license check.</p> <p>115.17(c-d):</p> <p>This auditor reviewed the Agency’s PREA Policies and they did not include language that require the agency to conduct criminal background records checks of new employees and contractors who may have contact with inmates. During the onsite portion of this audit, this auditor interviewed the Lieutenant responsible for</p>

conducting background checks. He indicated a criminal background check is completed for all new hires for the Sheriff's Office. They utilize state search (CCAP) (state site) and a national search (CIB/NCIC) along with a driver license check. The criminal history checks are documented on the .Background Investigation - Investigator Contact Log. They also reach out to all prior employers for information. The background check is only completed once.

115.17(e):

This auditor reviewed the Agency's PREA Policies and they did not include language that require the agency to conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates. As indicated above criminal background checks are only completed once. Although most jail employees have been at the jail for less than five years, the two contracted food service staff have been with the jail for over five years.

115.17(f):

Review of application material and interviews with the PREA Coordinator and HR Director revealed that the agency does not ask all applicants and employees who may have contact with inmates directly about previous misconduct described in provision (a) of this standard in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. Per the HR Director, employees have employees a continuing affirmative duty to disclose any such misconduct per the Union contract.

115.17(g):

This auditor reviewed the Agency's PREA Policies and they did not include language that material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination.

115.217(h):

During the onsite portion of this audit, this auditor interviewed Human Resources Director. She indicated the prospective employer would ask to see the personnel file, so yes we would provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee.

Corrective Action Needed:

1. Develop a new and or revise existing PREA Policy to address requirements of all provisions of this standard.
2. Ensure five year criminal background checks are completed for all new hires and contractor.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with policies 305 and 107 that addresses the requirements of this standard. Documentation of five year criminal background checks were provided.

	<p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.</p>
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<b>115.18</b>	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20, Prison Rape Elimination Act (PREA) Sexual Misconduct</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Juneau County Sheriff</li> <li>b. Jail Administrator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.18(a):  During the pre-onsite portion of this audit, the Facility indicated that Agency/Facility has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012.</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff of Juneau County. The Sheriff reported that no new substantial expansions or modifications have been completed since August 20, 2012. He was aware of the importance of site lines for staff to ensure the sexual safety (and general safety) of the Inmates in their care.</p> <p>115.18(b):  During the pre-onsite portion of this audit, the Facility indicated that the Facility has not installed or updated a video monitoring surveillance system since August 20, 2012.</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff as well as the Jail Administrator. The Sheriff reported that Juneau County Jail has not installed a camera surveillance system since August 20, 2012. The Jail Administrator reported that when installing or updating monitoring technology, such as a video monitoring system or electronic surveillance, the facility considers the effect of the facilities design and account for any blind spots in observation to enhance Inmates' protection from sexual abuse. During the site review, this auditor sat down with the jail Administrator to review the video surveillance system. All cameras were operational and the picture quality was clear.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.</p>

<b>115.21</b>	<b>Evidence protocol and forensic medical examinations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b JCSO Policy 1001: Prison Rape Elimination</li> <li>c. Memorandum of Understanding between JCSO and Hope House of South Central Wisconsin, Inc.</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. PREA Coordinator</li> <li>d. Hope House representative</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.21(a-b):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with Policy 1001. Section 1001.5 of this policy establishes, “The Office shall promptly, thoroughly and objectively investigate all allegations, including third party and anonymous reports, of sexual abuse or sexual harassment. Section 1001.3(f) establishes that the PREA Coordinator is responsible to ensure a protocol is developed for investigating allegations of sexual abuse in the Temporary Holding Facility. The protocol shall include:</p> <ol style="list-style-type: none"> <li>1. Evidence collection practices that maximize the potential for obtaining usable physical evidence based on the most recent edition of the U.S. Department of Justice’s (DOJ) Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents" or a similarly comprehensive and authoritative protocol.</li> <li>2. A process to ensure a criminal or administrative investigation is completed on all allegations of sexual abuse or sexual harassment.”</li> </ol> <p>The facility indicated in the PAQ that the agency/facility is responsible for conducting administrative and criminal investigations. The facility does not house Inmates under the age of 18. During the pre-onsite portion of this audit, the PREA Coordinator was interviewed. She confirmed the Agency/Facility is responsible for conducting administrative and criminal investigation and utilize a comprehensive evidence protocol.</p> <p>115.21(c):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with Policy G2.20. Section 1001.3(f)(4)I(A) of this Policy establishes, “Access to forensic medical examinations, without financial cost, for all victims of sexual abuse where appropriate. Such examinations shall be</p>

performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The efforts to provide SAFEs or SANEs shall be documented.

The facility reported that there have been no forensic medical examinations conducted in the past 12 months. reporting time period. The victim would be transported to a local hospital that has a SANE program.

115.21(d-e):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided documentation of a Memorandum of Understanding between Juneau County Sheriff's Office and Hope House.

During the onsite portion of this audit, this auditor interviewed the agency's PREA Coordinator and a I representative of Hope House. The PREA Coordinator reported, Juneau County Jail has a MOU with Hope House and services are available 24 hours per day/7 days per week. If requested by the victim, a qualified community-based advocate from Hope House would accompany and provide emotional support services, crisis intervention, information, and referrals during the forensic examination process and investigatory interviews A representative from Hope House reported that the two agencies have a formal agreement for victim advocate services. On the first day of the onsite portion of this audit, the facility indicated no Inmates were present in the facility that were classified as reporting a sexual abuse. The auditor attempted to corroborate this report during interviews with randomly selected Inmates. No Inmates were identified as having reporting a sexual abuse. As such, there were no inmates who reported sexual abuse to interview.

115.21(f):

During the pre-onsite portion of this audit, the Facility indicted this provision is not applicable as the Agency/Facility is responsible for conducting administrative and criminal investigations.

115.21(g): the auditor is not required to audit this provision.

115.21(h):

The auditor has determined that this provision is not applicable to the agency as the agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above.

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

<b>115.22</b>	<b>Policies to ensure referrals of allegations for investigations</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. Agency Website</li> <li>e. Investigative Files</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator/PREA Coordinator</li> <li>c. random staff</li> <li>d. Random Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.22(a-b):  During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with Policy 1001. Policy 1001, section 1001.5 establishes, “The Office shall promptly, thoroughly and objectively investigate all allegations, including third party and anonymous reports, of sexual abuse or sexual harassment.”</p> <p>During the pre-onsite portion of this audit, the Facility indicated that over the past 12 months, there had been one allegation of sexual abuse. The Facility reported that the allegation resulted in the completion of an administrative investigation and was determined to be unsubstantiated. During the on-site portion of this audit, the Sheriff of Juneau County was interviewed. The Sheriff indicated that he works closely with the Jail Administrator/ PREA Coordinator to ensure the agency’s procedure is followed precisely, ensuring an administrative or criminal investigation is completed for all allegations of sexual abuse or harassment. During both Inmate and staff interviews, the auditor questioned whether or not the interviewee was aware of any instances of sexual abuse or sexual harassment while they resided/worked at the facility in an attempt to verify that all instances of sexual abuse and sexual harassment were disclosed to this auditor. No disclosures were made.</p> <p>115.22(c):  The Facility/Agency is responsible for conducting criminal investigations; therefore this provision is not applicable.</p> <p>115.22(d) &amp;(e): the auditor is not required to audit these provisions.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all applicable provisions of this</p>



	standard.
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<b>115.31</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ) responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. .Educorr’s PREA Training Objectives</li> <li>e. PREA Training Certificates</li> <li>f. PREA Training Records</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Staff</li> <li>b. Jail Administrator/PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings: 115.31(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided the Agency’s PREA policies in support of their compliance with this standard in its PAQ responses. Policy G2.20 section 1(d)(i) and (iii) establishes, “JCSO Jail employees will receive PREA training at least every two years. Employees receive appropriate training on identifying and preventing sexual abuse/harassment during scheduled training.” Policy 1001, section 1001.9 establishes, “All employees, volunteers and contractors who may have contact with detainees shall receive office-approved training on the prevention and detection of sexual abuse and sexual harassment within this facility. The Training Supervisor shall be responsible for developing and administering this training as appropriate, covering at a minimum:</p> <ul style="list-style-type: none"> <li>• The Office’s zero-tolerance policy and detainees’ right to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.</li> <li>• The dynamics of sexual abuse and harassment in confinement settings, including which detainees are most vulnerable.</li> <li>• The right of detainees and staff members to be free from sexual abuse and sexual harassment, and from retaliation for reporting sexual abuse or harassment.</li> <li>• Detecting and responding to signs of threatened and actual abuse.</li> <li>• Communicating effectively and professionally with all detainees.</li> <li>• Compliance with relevant laws related to mandatory reporting of sexual abuse to outside authorities.”</li> </ul> <p>During the onsite portion of this audit, this auditor interviewed 15 staff and reviewed training file documents. All staff informed this auditor that they had received training in each of the enumerated required elements required under this standard.</p>

115.31(b):

During the pre-onsite portion of this audit, the Facility indicated compliance in this provision and provided a training curriculum from Educorr. The training is tailored to all genders. The Juneau County Jail houses male and female inmates.

115.31(c):

During the onsite portion of this audit, the PREA Coordinator was interviewed. She stated we do initial training with all employees and then bi-annual renewal through EduCorr. Between bi-annual training, staff reviews the PREA policy, we have Lexipol Daily Training Bulletins that randomly cover PREA topic and we mental health and medical training each year that touches PREA issues.

115.31(d):

During the pre-onsite portion of this audit, the Facility provided training certificates and training records. The PREA Coordinator stated staff receives training online utilizing Educorr's PREA online training courses. The online course requires participants to take quizzes and a final test to pass. When staff successfully pass the course they receive a certificate of completion. This confirms the participants understand the training material and documents completion.

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

<b>115.32</b>	<b>Volunteer and contractor training</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1374 374">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 383 1366 835" style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. Policy 1001: Prison Rape Elimination</li> <li>d. PREA Training Records/Acknowledgments</li> <li>e. JCSO Policy 310 Prison Rape Elimination Act Training</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Jail Administrator</li> <li>b. Volunteers and Contractor</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p data-bbox="256 875 384 909">Findings:</p> <p data-bbox="256 916 501 949">115.32(a),(b),(c):</p> <p data-bbox="256 956 1461 1283">During the pre-onsite portion of this audit, the Facility provided the Agency’s PREA policies in support of their compliance in this standard in its PAQ responses. Policy G2.20, section 1(d)(ii) establishes, “The department will ensure that all volunteers and contractors who have contact with inmates have been trained on their responsibilities based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the department’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.”</p> <p data-bbox="256 1323 1477 1816">The facility reported it contracts for food service and has 5 religious volunteers. The contract staff receives training online based on their responsibilities utilizing Educorr’s PREA online training courses. The online course requires participants to take quizzes and a final test to pass. This confirms the participants understand the training material. During the onsite portion of this audit, this auditor interviewed two contract staff and two volunteers. The contract staff confirmed they received PREA training and were able to verbalize their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Contract staff training documents were also reviewed. The Facility did not provide training documents or records for all volunteer. Interviews with two volunteers revealed they were aware of PREA but have never received any formal training from the Facility.</p> <p data-bbox="256 1856 676 1890"><b>Corrective Action Needed:</b></p> <ol data-bbox="256 1897 1453 2013" style="list-style-type: none"> <li>1.Ensure all volunteers that have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures.</li> </ol>

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with training records for all current volunteers that have contact with inmates. The agency also provided a new policy 310 which addresses staff PREA training.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.33</b>	<b>Inmate education</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Office PAQ responses</li> <li>b. Inmate Handbook</li> <li>c. PREA Video</li> <li>d. PREA Educational Inmate Information form</li> <li>e. Inmate Confidential Case Files</li> <li>f. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>g. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Intake Staff</li> <li>b. Random Inmates</li> <li>c. Jail Administrator/PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> <li>b. PREA signage and posted PREA Notices</li> </ol> </li> </ol> <p>Findings:  115.33(a), (b), (c), (e):</p> <p>During the pre-onsite portion of this audit, the Facility provided this auditor with Policy G2.20 and indicated compliance with these provisions. Policy G2.20, section 1(e)(i) establishes “Upon arrival at the correctional facility, information on JCSO’s zero tolerance policy on sexual abuse/harassment and how to report incidents or suspicions of sexual abuse/harassment is communicated to inmates orally and in writing in a language understood by the inmate” During intake, a Deputy and the Inmate review the PREA Educational Inmate Information form. Staff answers questions as needed. The Inmate signs the form acknowledging zero tolerance for sexual abuse and sexual harassment and how to report incidents. The inmate also receives an Inmate Rules and Regulation Handbook that contains PREA information.</p> <p>The facility indicated that inmates admitted on July 1, 2022 and after were given this information at intake. There was a catch up inmate education session on June 30, 2022 for all inmates at the facility on that date. Policy G2.20, section 1(e)(ii) establishes, “Within 30 days of intake, the JCSO provides comprehensive education to inmates regarding: an inmate’s right to be free from sexual abuse/harassment; an inmate’s right to be free from retaliation for reporting such; and, agency policies and procedures for responding to such incidents. The education includes:</p> <ol style="list-style-type: none"> <li>1. Prevention/intervention;</li> <li>2. Self-protection;</li> <li>3. Reporting procedures; and,</li> <li>4. Available treatment and counseling services</li> </ol>

During the onsite portion of the audit, the auditor interviewed intake staff. Intake Staff in this facility are the Deputies. Upon admission, the Inmate is provided and reviews with staff the PREA Educational Inmate Information form. Sixteen randomly selected Inmates were formally interviewed during the onsite portion of this audit. During random Inmate interviews, Inmates were asked specifically if they received information on 1) your right to not be sexually abused or sexually harassed, 2) how to report sexual abuse or sexual harassment, 3) your right not to be punished for reporting sexual abuse or sexual harassment, and 4) whether the Inmate received information about the facility's rules against sexual abuse and harassment. Every Inmate answered that they received all of the above-listed information. A random sample of 11 Inmate files were selected by this auditor to review to ensure documentation of the Inmate's participation in the above-listed informational session. All Inmate files included a signed copy of the PREA Educational Inmate Information form. Six files were for inmates that arrived at the facility after July 1, 2022 and the form indicated they received PREA information on the day of intake. Five files were for inmates that arrived at the facility prior to July 1, 2022. The form indicated that these inmates received PREA information on June 30, 2022. In addition to receiving PREA information at intake, inmates are to watch a PREA video. The video is available on video visitation kiosks in each pod and on inmate tablets. It is **recommended** that the facility ensures and documents that all inmates have watched the video.

The Agency only operates one Facility and indicated that a full orientation is completed upon intake for all Inmates. Inmates are not transferred from another JSCO Facility.

115.33(d):

Policy G2.20, section 1(e)(i) establishes "information on JCSO's zero tolerance policy on sexual abuse/harassment and how to report incidents or suspicions of sexual abuse/harassment is communicated to inmates orally and in writing in a language understood by the inmate." Policy 1001, section 1001.3(g) indicates the PREA Coordinator is responsible to ensure that detainees with limited English proficiency and disabilities have an equal opportunity to understand and benefit from efforts to prevent, detect and respond to sexual abuse and sexual harassment. This includes, as appropriate, access to interpreters and written materials in formats or through methods that provide effective communication to those with disabilities (e.g., limited reading skills, intellectual, hearing or vision disabilities).

During the onsite portion of the audit, this auditor reviewed Inmate education materials provided to the Inmates (PREA video, Inmate Handbook excerpts, and PREA posters) displayed throughout the facility. On the first day of the onsite portion of the audit, the facility indicated they currently had no Inmates with physical disabilities, a cognitive disability, or who were limited-English proficient. The PREA Coordinator indicated this is typical of the population the facility receives. Therefore they were no target group Inmates to interview.

115.33(f):

During the pre-onsite portion of this audit, the Facility provided this auditor with Policy G2.20 and indicated compliance with this provision. Policy G2.20, section

1(e)(iii) establishes, “ The JCSO ensures key information is continuously and readily available or visible to inmates through posters, the inmate handbook, or other written formats.” Inmates have access to the inmate handbook(contain PREA information) and the PREA video is available on the video visitation kiosks in each pod and on inmate tablets. It is **recommended** that inmates receive a copy of their signed PREA Educational Inmate Information form or the form be made available to inmates on the kiosks and/or tablets.

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



<b>115.34</b>	<b>Specialized training: Investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy 310 Prison Rape Elimination Act Training</li> <li>c. PREA Investigating Training certificate from Northeast Wisconsin Technical College</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Jail Administrator</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.34(a)-(c):        During the pre-onsite portion of this audit, the Facility indicated that Juneau County Jail does not have any staff that completed training in conducting sexual abuse investigations in confinement settings. During the onsite portion of this audit, this auditor was able to corroborate is information during interview with the Jail Administrator. She confirmed that no staff has completed this specialized training.</p> <p>115.34(d): the Auditor is not required to audit this provision.</p> <p><b>Corrective Action Needed:</b></p> <p>Ensure that at least one staff that investigates sexual abuse allegations receive training in conducting such investigations in confinement settings.</p> <p>Final Audit Report Reassessment:</p> <p>During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with new policy 310 which addresses staff PREA training.. Also provided was documentation that one staff member attended a two day PREA Investigating training course at Northeast Wisconsin Technical College.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.</p>

115.35	Specialized training: Medical and mental health care
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Sheriff’s Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO policy 1001: Prison Rape Elimination</li> <li>d. Training certificates</li> <li>e. JCSO Policy 310 Prison Rape Elimination Act Training</li> <li>f. Specialized Medical training Curriculum</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Medical and Mental Health staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.35(a):  During the pre-onsite portion of this audit, the Facility indicated that Juneau County Sheriff’s Office does not have a policy that address specialized PREA training for employ medical or mental health staff. During the onsite portion of this audit, this auditor interviewed the PREA Coordinator and Medical and Mental Health staff. The PREA Coordinator indicated the Medical staff have not received any PREA training. The Medical Staff confirmed that they have not received the specialized training for medical and mental health staff. They further indicated that they have not attended any PREA training. The mental health staff indicated that they did not receive the specialized medical and mental health training but have received PREA training provided to all staff.</p> <p>115.34(b):  The medical staff at this facility does not conduct forensic exams; inmates are transported to a local hospital that has a SANE program.</p> <p>115.34(c):  As indicated in provision (a) above as medical and mental health staff did not receive specialized there were no training records available.</p> <p>115.34(d):  During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(d)(i) indicates, “JCSO Jail employees will receive PREA training at least every two years. “ As .indicated in provision (a) above the medical staff did not receive PREA training. The mental Health staff received PREA training and training certificates were provided.</p>

Corrective Action Needed:

1. Develop or revise current PREA policy to include required specialized training for medical and mental health staff.
1. Ensure all medical and mental health staff receives the specialized training as required by provision (a) of this standard.
2. Ensure all specialized training is documented as required by provision (c) of this standard.
3. Ensure all medical staff receives general PREA training in addition to specialized training as required by provision (d) of this standard.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 310 which addresses staff PREA training. A new Medical training curriculum was developed. Documentation was provided that all medical and mental health staff received general PREA training and specialized medical PREA training.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.41</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA)/ Sexual Misconduct</li> <li>c. Risk Screening Tool-Female</li> <li>d. Risk Screening Tool-Male</li> <li>e. Initial Risk Screening Summary</li> <li>f. Inmate confidential case files</li> <li>g. JCSO Policy 508 Inmate Classification</li> <li>h. Completed Risk Screening documented</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Jail Administrator/PREA Coordinator</li> <li>b. Staff responsible for risk screening</li> <li>c. Random Inmates</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.41(a-b), (f-g):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(f) establishes, "SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS / CLASSIFICATION</p> <p>The department shall provide housing assignments that reduce the likelihood of sexual abuse and sexual harassment while an inmate is in JCSO custody.</p> <p>i) Vulnerable Inmates: Inmates will be evaluated at Intake to specifically determine their vulnerability to sexual abuse as indicated by the following risk factors:</p> <ol style="list-style-type: none"> <li>(f) Age;</li> <li>(g) Physical stature;</li> <li>(h) Mental, physical or developmental disability;</li> <li>(i) Sex offender status, (per criminal history);</li> <li>(j) First time offender status, (first time in custody);</li> <li>(k) Past history of victimization (per collateral info in police reports, etc.);</li> <li>(l) Inmate's own perception of vulnerability; and/or</li> <li>(m) Perception of inmate to be lesbian, gay, bisexual, transgender, intersex, or gender nonconforming.</li> </ol> <p>(ii) An inmate should be designated with and identified for vulnerability if:</p> <ol style="list-style-type: none"> <li>(1) Three or more of the above criteria apply, or</li> <li>(2) One or more of these factors apply with sufficient documentation by the reviewer to warrant concern.</li> </ol> <p>vi) Inmates will be evaluated at Intake to specifically determine if there are</p>

indications that he or she is a sexually abusive inmate, prone to victimize other inmates, especially in regard to sexual behavior. Indications include the following:

- vii) a. History of sexually abusive behavior (per criminal history, misconduct reports regarding sexual activity or abuse, as well as collateral info in police reports, etc.).
- ix) An inmate's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness." The policy does not reference 30 day reassessments.

During the onsite portion of the audit, the auditor interviewed the PREA Coordinator. She informed this auditor the initial screening at intake started on July 1, 2022 and 30 day assessments are from that date forward. Inmates admitted prior to July 1, 2022 have not been screened. She further explained that the initial intake is being computerized and the 30 day reassessments are completed on paper copies utilizing the Wisconsin Department of Corrections Risk Screening tool for females and males. During the onsite portion of the audit, the auditor interviewed intake staff. Intake Staff in this facility are the Deputies. Upon admission, all inmates are assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. The facility reported that 87 inmates were screened within 72 hours of admission since July 1, 2022. Only three 30 day reassessments have been completed.

115.41(c):

During the pre-onsite portion of this audit, the Facility indicated compliance in this standard and provided this auditor with a copy of their risk-screening forms. The computerized process for the initial risk screening is still being developed along with objective scoring procedures. The form used for the 30 day reassessments requires screening staff to assess the screened resident using 12 vulnerability factors and five aggressive/predatory factors through a series of yes and no questions. Screening staff then calculated the score to determine if an inmate a known victim, risk of victimization, known aggressor or risk of aggressor. As a result, the facility's screening instrument is objective as the results are measurable and the same results could be reproduced by other staff.

115.41(d)-(e):

A review of the facility's initial risk screening summary does not consider all of the minimum criteria required by these provisions to assess inmates for risk of sexual victimization or in assessing inmates for risk of being sexually abusive.

115.41(h):

Review of Agency Policies revealed they do not include any language that prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions during screening.

115.41(i):

Review of Agency Policies revealed they do not include any language that address implementing appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that

sensitive information is not exploited to the inmate's detriment by staff or other inmates.

Corrective Action Needed:

1. Finalize the computerized process for the initial risk screening along with objective scoring procedures to meet requirements of this standard.
2. Revise and implement PREA policy to address 30 day reassessments.
3. Revise the PREA policy to include language that prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions during screening.
4. Revise the PREA policy or implement procedures to provide appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 508. This is a new policy that was developed and implemented that addresses the requirements of this standard. Completed PREA screening documents were also provided.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.42</b>	<b>Use of screening information</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA)/ Sexual Misconduct</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Staff responsible for risk screening</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.42(a-b):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(f)xii) establishes, “The department makes individualized determinations about how to ensure the safety of each inmate including housing, work assignments and access to services.” Section 1(f)xii) establishes, “The department shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.”</p> <p>During the onsite portion of this audit, this auditor interviewed the PREA Coordinator and staff responsible for risk screening. The PREA Coordinator reported that the facility utilizes a screening assessment to determine whether or not each incoming inmate is a known or potential abuser or a known or potential victim, and does not house abusers and victims together. Staff interviewed reported information secured through the screening process is used to determine the need for additional medical or mental health follow-up, and to make classification decisions based on risk factors. Individual decisions are made for each inmate.</p> <p>115.42(c-g):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(f) viii) establishes, “In deciding inmate housing and programming assignments for transgender or intersex inmates, the department shall consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether the placement would present management or security problems.</p> <ol style="list-style-type: none"> <li>(1) If requested, transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.</li> <li>(2) A transgender or intersex inmate’s own views with respect to his or her own safety shall be given serious consideration.”</li> </ol> <p>During the onsite portion of this audit, this auditor interviewed the PREA Coordinator.</p>

The PREA Coordinator indicated placement and programming assignments for each transgender or intersex inmate would be reassessed at least twice each year to review any threats to safety experienced. The PREA Coordinator stated the agency is not under a consent decree or other legal judgement regarding housing. The practice of placing LGBTI inmates in dedicated units or wings solely based on such identification is prohibited by policy. During the tour, there was no indication that restrictive housing units are used on a regular basis due to PREA risk factors. Transgender and Intersex Individuals are given an opportunity to shower separately from other individuals and fill out a preference form upon intake. There were no transgender inmates housed at the jail during the on-site audit.

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



<b>115.43</b>	<b>Protective Custody</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. Sexual Abuse/Assault/Harassment Prevention &amp; Intervention Policy G2.20</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator/PREA Coordinator</li> <li>c. Staff responsible for supervising segregated housing</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.43(a-e):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(f) addresses the requirement of this standard. The policy establishes,</p> <p>“iii) Inmates at high risk for sexual victimization shall not be placed in administrative housing unless an assessment of all available alternatives determines that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in administrative housing for less than 24 hours while completing the assessment.</p> <p>iv) Inmates placed in administrative housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:</p> <ol style="list-style-type: none"> <li>(1) The opportunities that have been limited;</li> <li>(2) The duration of the limitation; and</li> <li>(3) The reasons for such limitations</li> </ol> <p>v) The facility shall assign such inmates to administrative housing only until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed a period of 30 days.”</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff and Jail Administrator. They stated inmates at high risk for sexual victimization are not placed in the involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. They indicated due to the design of the jail, inmates can be separated by pods. If an involuntary segregated housing placement is made the placement is reviewed on a daily basis until other housing can be found. Segregated housing assignments will not exceed a period of thirty (30) days. Inmates placed in protective custody shall have access to program privileges, education, and work opportunities to the extent possible. If restrictions</p>

occur, the facility documents the restrictions, duration of the limitation, and reasons for the limitation. There were no inmates placed in involuntary segregation due to being at a high risk of sexual victimization in the past 12 months. During the onsite portion of the audit, this auditor toured the segregated housing units and talked to staff supervising these areas. No inmates at high risk for sexual victimization were observed in segregated housing.

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

<b>115.51</b>	<b>Inmate reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA)\Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. PREA Educational Inmate Information</li> <li>e. MOU with Hope House</li> <li>f. Revised PREA Educational Inmate Information</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Inmates</li> <li>b. Random Staff</li> <li>c. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant; review of information displayed throughout the facility</li> </ol> </li> </ol> <p>Findings:</p> <p>115.51(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided Agency PREA policies in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.4 establishes, “Detainees may make reports verbally, in writing, privately or anonymously of any of the following</p> <ul style="list-style-type: none"> <li>• Sexual abuse</li> <li>• Sexual harassment</li> <li>• Retaliation by other detainees or staff for reporting sexual abuse or sexual harassment</li> <li>• Staff neglect or violation of responsibilities that may have contributed to sexual abuse or sexual harassment</li> </ul> <p>During intake the Office shall notify all detainees of the zero-tolerance policy regarding sexual abuse and sexual harassment, and of at least one way to report abuse or harassment to a public or private entity that is not part of the Office and that is able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials. This allows the detainee to remain anonymous.”</p> <p>Policy G2.20, section 2.(a) establishes,</p> <p>“i) Inmates who are victims of sexual abuse/harassment may confidentially disclose such to any JCSO staff, in person, by grievance system, by phone, or through an attorney or family member. Such complaints may also be made anonymously.</p> <p>ii) These avenues are also available to inmates reporting retaliation, staff neglect, or violation of responsibilities that may have contributed to such incidents.”</p>

The facility also provided this auditor with a PREA Educational Inmate Information form that inmates sign at intake which includes information on reporting options. During the onsite portion of this audit, this auditor interviewed 15 staff and 16 inmates. All staff indicated that inmates can verbally report these incidents to any staff member and that inmates can report in writing or call hotline. Inmate responses varied but a review of all responses indicated that the inmates were able to identify at least two ways to report; the most common answers were to their case manager or other staff in-person or through a third party..

115.51(b):

During the onsite portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that the facility does not have an agreement with a public or private entity or office that is not part of the agency to provide at least one way for inmates to report sexual abuse or sexual harassment.

115.51(c):

During the pre-onsite portion of this audit, the Facility provided Agency's PREA Policies in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.4 establishes, "Office members shall accept reports from detainees and third parties and shall promptly document all reports." Policy G2.20, section 1.(b)(I) establishes, "A JCSO employee aware of an incident or allegation that an inmate has sexually abused/harassed another inmate reports the information to the facility administrator/appropriate supervisor without delay." Section 2.(a)(v) establishes, "A report of sexual abuse/harassment is taken seriously and reported without delay to the facility lieutenant/ supervisor. The lieutenant/ supervisor notifies the facility administrator and PREA coordinator." The facility indicated in the PAQ that staff are required to immediately document verbal reports.

During the onsite portion of this audit, this auditor interviewed ten randomly selected staff. All staff indicated that they would accept a report that was made verbally, in writing, anonymously, and from third parties. Staff also indicated that they are required to immediately report this report by notifying a supervisor and that they would be required to document the report - including verbal reports. .

115. 51(d):

During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.3 (d) indicates the facility should develop methods for staff to privately report sexual abuse and sexual harassment of detainees."

During the onsite portion of this audit, this auditor interviewed the PREA Coordinator; she indicated staff can privately report to a supervisor or to the PREA Coordinator. She also indicated all new employees receive instruction on the specifics of the PREA policies.

**Corrective Action Needed:**

Identify an external agency and enter into an agreement to accept reports per requirements of provision (b) of this standard. When this process is completed and

implemented update inmate education material to reflect the change.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with a signed MOU with Hope House to accept reports per requirements of provision (b) of this standard. A revised PREA Educational Inmate Information document was also submitted.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.52</b>	<b>Exhaustion of administrative remedies</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20</li> <li>c. PREA Educational Inmate Information</li> <li>d. Inmate Grievance procedure</li> <li>e. JSCO Policy 609 Inmate Grievances</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Random Inmates</li> <li>b. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings):</p> <p>115.52(a):  During the pre-onsite portion of this audit, the Facility indicated it has an administrative procedure for dealing with inmate grievances regarding sexual abuse in its PAQ responses. Policy G2.20, section 2(a)(i) indicates “Inmates who are victims of sexual abuse/harassment may confidentially disclose such to any JCSO staff, in person, by grievance system, by phone, or through an attorney or family member. Such complaints may also be made anonymously.” The PREA Education Inmate Information form also indicates an inmate can file a written grievance.</p> <p>115.52(b-g):  This audit reviewed the PREA policies and grievance process and found that neither address nor complies with the requirement of these provisions.</p> <p><b>Corrective Action Needed:</b>  Revise grievance process to meet requirements of provisions (b) thru (g) of this standard. When this process is completed and implemented update inmate education material to reflect the changes.</p> <p>Final Audit Report Reassessment:</p> <p>During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with policy 609. This is a new policy that was developed and implemented. Sections 609.6 and 609.6.1 of this policy address the requirements of this standard. The Inmate rule book was also updated to address inmate grievances regarding sexual abuse.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported</p>

	deficiency and is fully compliant with this standard.
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**115.53****Inmate access to outside confidential support services****Auditor Overall Determination:** Meets Standard**Auditor Discussion**

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)
  - a. Juneau County Jail PAQ responses
  - b. JCSO Policy 1001: Prison Rape Elimination
  - c. MOU with Hope House of South Central Wisconsin, Inc. (Hope House)
  - d. JCSO Policy 606: Prison Rape Elimination Act
2. Interviews
  - a. Random Inmates
3. Site Review Observations:
  - a. Observations during on-site review of physical plant

Findings:

115.53(a)-(b):

During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.3(f)(5) establishes, "In accordance with security needs, provisions to permit, to the extent available, detainee access to victim advocacy services if the detainee is transported for a forensic examination to an outside hospital that offers such services." The facility also provided a MOU with Hope House to provide inmates with access to outside victim advocates for emotional support services related to sexual abuse

During the onsite portion of this audit, this auditor interviewed 16 inmates (there were no inmates designated by facility staff as having reported prior sexual abuse). Out of these inmate interviews, a majority of the inmates were not able to inform this auditor about outside victim advocates for emotional support services related to sexual abuse. While making observations during the site review, it revealed that no information regarding victim advocacy was posted. The facility does not inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which report of abuse will be forwarded to authorities in accordance with mandatory reporting laws

115.53(c):

During the pre-onsite portion of this audit, the Facility indicated that the facility has a memorandum of understanding (MOU) with Hope House a community service providers that are able to provide residents with emotional support services related to sexual abuse.

Corrective Action Needed:

1. Ensure staff/the facility are providing inmates with information about access to outside victim advocates for emotional support services related to sexual abuse in a



manner that allows for inmates to retain this information or be able to know where to look in the event they wanted to access this information.

2. Develop clear information and educate inmates and staff to what extent communications to outside support services are kept confidential.

3. Establish what, if any, mandatory reporting laws exist in Wisconsin and communicate them to residents prior to giving them access to outside support services.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with policy 606 and revised inmate information documents.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.54</b>	<b>Third-party reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy 1001: Prison Rape Elimination</li> <li>c. PREA Educational Inmate Information form</li> <li>d. Agency Website</li> <li>e. JSCO Policy 606: Prison Rape Elimination Act</li> <li>f. JSCO Policy 609: Inmate Grievances</li> </ol> </li> <li>2. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant; review of information displayed throughout the facility</li> </ol> </li> </ol> <p>Findings:</p> <p>115.54(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided this auditor with the Agencies PREA policies and the PREA Educational Inmate Information form. Review of the documentation provided indicates staff will receive third party reports but does not indicate inmates can report through a third party. Review of the Agency website, disclosed no information on third party reporting.</p> <p>Corrective Action Needed:</p> <ol style="list-style-type: none"> <li>1. Revise policies and inmate educational material to include third party reporting.</li> <li>2. Once revised and implemented post information on the Agency website and inform all inmates of the option.</li> </ol> <p>Final Audit Report Reassessment:</p> <p>During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with policies 606 and 609. These are new policies that were developed and implemented and include language regarding third party reporting. The PREA Educational Inmate Information form was also revised to include information on third party reporting.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.</p>

<b>115.61</b>	<b>Staff and agency reporting duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. Sexual Abuse/Assault/Harassment Prevention &amp; Intervention Policy G2.20</li> <li>c. Reporting and Handling of Significant or Unusual Incidents Policy SP-9</li> <li>d. Reports of Sexual Abuse and Sexual Harassment</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Random Staff</li> <li>c. Medical Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.61(a-c):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with the Agency’s PREA Policies in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.4.1 establishes, “Office members shall accept reports from detainees and third parties and shall promptly document all reports. All members shall report immediately to the Shift Supervisor any knowledge, suspicion or information regarding:</p> <ol style="list-style-type: none"> <li>(a) An incident of sexual abuse or sexual harassment that occurs in the Temporary Holding Facility.</li> <li>(b) Retaliation against detainees or the member who reports any such incident.</li> <li>(c) Any neglect or violation of responsibilities on the part of any office member that may have contributed to an incident or retaliation.</li> </ol> <p>No member shall reveal any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment and investigation decisions.”</p> <p>During the onsite portion of this audit, this auditor interviewed 15 staff. All staff interviewed reported that the Juneau County Jail requires all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff further reported that the procedure for reporting any information related to a resident sexual abuse incident would be to notify their immediate supervisor, document and keep information confidential. During the pre-onsite portion of this audit, this auditor also interviewed medical and mental health staff. These staff were aware of their reporting responsibilities.</p>

115.61(d):

During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the Agency's PREA Policies in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.4.1 establishes, "If the alleged victim is under the age of 18 or considered a vulnerable adult, the Shift Supervisor shall also report the allegation as required under mandatory reporting laws and office policy. During the pre-onsite portion of this audit, the Facility indicated that they do not service anyone under the age of 18. This was verified by the auditor by reviewing the inmate roster as of the first day of the audit and by interviews with the Jail Administrator who also serves in the capacity as the PREA Coordinator.

115.61(e):

During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the Agency's PREA Policies in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.4.2 establishes, "The Shift Supervisor shall report to the Office's designated investigators all allegations of sexual abuse, harassment, retaliation, neglect or violations leading to sexual abuse, harassment or retaliation. This includes third-party and anonymous reports." The Facility reported that over the past 12 months, there had been one allegation of sexual abuse. The Facility provided the auditor with the investigative file for this incident. A review of this investigative file revealed that the facility reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports to the facility's designated investigators.

During the onsite portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator indicated that upon receiving any allegation, including from third-party and anonymous sources, staff are required to document the report, immediately contact their supervisor who is then required to report it to the PREA coordinator and investigator.

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

<b>115.62</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator</li> <li>c. Random Staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.62(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.2 establishes, "The Juneau County Sheriff's Office will take immediate action to protect detainees who are reasonably believed to be subject to a substantial risk of imminent sexual abuse." In the past 12 months, the Facility indicated that there have no occurrences where the agency or facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff, Jail Administrator and randomly selected staff. The Jail Administrator reported the Facility makes sure that victims and potential victims are not housed with aggressors. Staff reported that they would relocate the alleged victim and immediately call their Supervisor. Staff reported their primary responsibility is to make sure the inmate felt safe. The Sheriff Director reported that the agency would take any steps necessary to make sure the inmate was safe and immediately begin to investigate the concern.</p> <p>During the investigation, the alleged aggressor and alleged victim would be separated.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with this standard.</p>

<b>115.63</b>	<b>Reporting to other confinement facilities</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.63(a-c):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.42 establishes “Upon receiving an allegation that a detainee was sexually abused while confined at another facility, the Shift Supervisor shall notify the head of the facility or the appropriate office of the agency where the alleged abuse occurred. The notification shall be made as soon as possible but no later than 72 hours after receiving the allegation. The Shift Supervisor shall document such notification.” The Facility reported that during the past 12 months, there were no allegations received that an inmate was abused while confined at another facility. Therefore there were no documents to review.</p> <p>During the onsite portion of this audit, this auditor interviewed the Jail Administrator and she reported the Shift Supervisor would be responsible for making the notification and confirmed that the Facility did not receive any allegations from other facilities.</p> <p>.</p> <p>115.63(d):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.5 establishes, “The Office shall promptly, thoroughly and objectively investigate all allegations, including third party and anonymous reports, of sexual abuse or sexual harassment.” The facility reported that during the past 12 months, there were no allegations received from another facility that an inmate was abused while confined at their facility. During the onsite portion of this audit, this auditor interviewed the Sheriff. The Sheriff reported that the designated point of contact at the Jail is the Jail Administrator/PREA Coordinator. The Jail Administrator reported that the agency would be responsible for immediately investigating the allegation in accordance with policy. The Facility Director reported that there were no examples of another facility or agency reporting an allegation occurring while an inmate was housed at this facility.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has</p>

	determined that the agency is compliant with all provisions of this standard.
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<b>115.64</b>	<b>Staff first responder duties</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.)       <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews       <ol style="list-style-type: none"> <li>a. Security Staff and Non-security Staff First Responders</li> </ol> </li> <li>3. Site Review Observations:       <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.64(a):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its Pre-Audit Questionnaire (PAQ) responses. Policy 1001, section 1001.5.1 establishes, “The first deputy to respond to a report of sexual abuse or sexual assault shall</p> <ol style="list-style-type: none"> <li>(a) Separate the parties.</li> <li>(b) Establish a crime scene to preserve and protect any evidence. Identify and secure witnesses until steps can be taken to collect any evidence.</li> <li>(c) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating.</li> <li>(d) If the abuse occurred within a time period that still allows for the collection of physical evidence, 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.”</li> </ol> <p>During the onsite portion of this audit, this auditor interviewed security staff. There were no inmates that the Facility classified as having reported sexual abuse. The auditor attempted to corroborate this report by reviewing confidential inmate case files and during inmate and staff interviews. No inmates who reported a sexual abuse were discovered. In this facility; all staff interviewed reported that as a first responder it was their responsibility to separate the alleged victim and abuser, secure the scene, notify their supervisor and not allow either the alleged abuser or alleged victim take any actions that could destroy physical evidence. A review of the Facility’s sexual abuse allegations over the past 12-month period, revealed that there was one allegation made and that that allegation was received approximately 30 days after the incident had occurred.</p> <p>.</p> <p>115.64(b):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its Pre-Audit Questionnaire (PAQ) responses.</p>



Policy 1001, section 1001.5.1 establishes, "If the first responder is not a deputy the responder shall request that the alleged victim not take any actions that could destroy physical evidence and should then notify a law enforcement staff. "The Facility reported that during the past 12 months there were zero instances where the first staff responder was not a security staff member.

During the onsite portion of this audit, this auditor interviewed non-security staff first responders utilizing the random staff protocol. All staff interviewed reported that their responsibility was to remain with the alleged victim and make sure that the alleged victim does not take any actions that could destroy physical evidence. Staff reported they are also required to notify the on-duty supervisor of the allegation.

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

<b>115.65</b>	<b>Coordinated response</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail (PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. JCSO Policy 606 Prison Rape Elimination Act</li> <li>e. Coordinated Response Plan</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Jail Administrator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.65(a):</p> <p>During the pre-onsite portion of this audit, the Facility responded that it did not have a Coordinated Response Plan in its PAQ responses to this Standard. This auditor reviewed the Agency’s PREA policies and did not find any reference to a Coordinated Response Plan.</p> <p>During the on-site portion of the audit, this auditor interviewed the Jail Administrator. The Jail Administrator confirmed that the Facility or Agency does not have a Coordinated Response Plan as required by this Standard</p> <p><b>Corrective Action Needed:</b></p> <p>Developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse.</p> <p>Final Audit Report Reassessment:</p> <p>During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 606 which addresses the development of a coordinated response plan. A response plan was provided.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.</p>

<b>115.66</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. Agreement between Juneau County and Juneau County Deputy Sheriff's Association</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.66(a): The facility indicated compliance with this standard and provided a copy of the Agreement between Juneau County and Juneau County Deputy Sheriff's Association. Review of the Agreement did not disclose language that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>During the onsite portion of this audit, this auditor interviewed the Sheriff. The Sheriff confirmed the contract does not limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or the disciplinary process.</p> <p>115.66(b): The auditor is not required to audit this provision.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all applicable provisions of this standard.</p>

<b>115.67</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA)/Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Agency Head/Sheriff</li> <li>b. Jail Administrator</li> <li>c. Designated Staff Member Charged with Monitoring Retaliation</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.67(a),(c)&amp;(d):</p> <p>During the pre-onsite portion of this audit, the Facility provided the Agency’s PREA policies in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 2(d) establishes,</p> <p>“i) For at least 90 days following a report of sexual abuse, the PREA Coordinator (PC)/designee conducts a monthly status check on inmates reporting sexual abuse, reported to have suffered such abuse, or a cooperating witness expressing a fear of retaliation. The inmate’s disciplinary reports, housing, and program participation are reviewed for changes suggestive of retaliation. The PC/designee documents the findings in the case notes, and acts promptly to remedy any such retaliation.</p> <p>ii) The PC monitors negative performance reviews, including disciplinary actions, or reassignment of staff reporting sexual abuse of inmates. Such monitoring is conducted monthly for at least 90 days and documented.</p> <p>iii) Such monitoring continues beyond 90 days if the initial monitoring indicates a continuing need. If an allegation is determined to be unfounded, monitoring is terminated.”</p> <p>Policy 1001, section 1001.6 establishes, “All detainees and members who report sexual abuse or sexual harassment or who cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures shall be taken to protect that individual. The Shift Supervisor or the authorized designee shall employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged abusers from contact with victims, and emotional support services for detainees or members who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Shift Supervisor or the authorized designee shall identify a staff member to monitor the conduct and treatment of detainees or members who have reported sexual abuse and of detainees who were reported to have suffered sexual abuse. The staff member shall act promptly to remedy any such retaliation. In</p>

the case of detainees, such monitoring shall also include periodic status checks.”

A review of these policies reveals that the Agency has established policies to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation. Further the Agency has designated the PREA Coordinator as the staff members charged with monitoring retaliation. The Facility reported that there have been no times an incident of retaliation occurred in the past 12 months. During the onsite portion of this audit, this auditor interviewed the PREA Coordinator (staff charged with monitoring retaliation). The PREA Coordinator reported that in the event that the facility suspected retaliation against an alleged victim or person cooperating with an investigation, they would employ the protective measures identified in the policy. The staff person interviewed that is charged with monitoring retaliation reported that the initial retaliation monitoring period begins at the time abuse occurred or time report of abuse was made. The initial retaliation monitoring period will last 90 days. The monitoring period will be extended if the need exists. This policy and procedure will encompass and protect any individual who cooperates with an investigation and or communicates a fear of potential retaliation. She would conduct weekly status checks of the target that included a face-to-face check-in and review of disciplinary reports, housing changes, programmatic changes, performance evaluations, staff reassignments, and face-to-face check-ins. These status checks would continue weekly for duration of the 90-day period of monitoring, or as extended. It is **recommended** that the facility develop a form to document retaliation monitoring.

115.67(b):

During the onsite portion of this audit, this auditor interviewed the Agency Head and PREA Coordinator to make a compliance determination of this provision. The Sheriff reported that depending on the circumstances surrounding the report, the facility would consider changing room assignments, transfer or removal of the alleged abuser from the facility and the Juneau County Jail would offer emotional support services through a local community-based agency. The Jail Administrator informed this auditor an action plans will be developed to ensure the reporter is free from retaliation. On the first day of the onsite portion of the audit, there were no inmates at the Facility classified as having reported sexual abuse. The auditor attempted to corroborate this report by reviewing confidential inmate t case files and during inmate and staff interviews. No inmates who reported a sexual abuse were discovered. As a result, there were no inmates present in the facility that reported sexual abuse to interview.

115.67(e):

During the onsite portion of this audit, this auditor interviewed the Sheriff and the staff charged with monitoring retaliation. The Sheriff reported that if any other individual who cooperated with an investigation expressed a fear of retaliation, the agency would take any reasonable measure possible to ensure that person is safe.

115.67(f):

The auditor is not required to audit this provision.

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

	standard.
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<b>115.68</b>	<b>Post-allegation protective custody</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA)/Sexual Misconduct</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Jail Administrator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.68(a)</p> <p>During the pre-onsite portion of this audit, the Facility provided the Agency’s PREA policies in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 1(f) establishes,</p> <p>“iii) Inmates at high risk for sexual victimization shall not be placed in administrative housing unless an assessment of all available alternatives determines that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate in administrative housing for less than 24 hours while completing the assessment.</p> <p>iv) Inmates placed in administrative housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If the facility restricts access to programs, privileges, education, or work opportunities, the facility shall document:</p> <ol style="list-style-type: none"> <li>(1) The opportunities that have been limited;</li> <li>(2) The duration of the limitation; and</li> <li>(3) The reasons for such limitations</li> </ol> <p>v) The facility shall assign such inmates to administrative housing only until an alternative means of separation from likely abusers can be arranged. Such an assignment shall not ordinarily exceed a period of 30 days.”</p> <p>Per interview with the Jail Administrator, the jail has many options available to keep victims separated from abusers. Per the PAQ, in the past 12 months no inmates who alleged sexual abuse were held in involuntary segregation. The auditor toured and confirmed no inmates were housed in the Segregation Unit for protection from sexual abuse during the on-site audit.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is compliant with all provisions of this standard.</p>

<b>115.71</b>	<b>Criminal and administrative agency investigations</b>
	<p data-bbox="256 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 297"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1374 374">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 383 1358 792" style="list-style-type: none"> <li data-bbox="256 383 1123 416">1. Documents: (Policies, directives, forms, files, records, etc.) <ol data-bbox="284 425 1358 584" style="list-style-type: none"> <li data-bbox="284 425 794 459">a. Juneau County Jail PAQ responses</li> <li data-bbox="284 468 1358 501">b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li data-bbox="284 510 911 544">c. JSCO Policy 1001: Prison Rape Elimination</li> <li data-bbox="284 553 557 586">d. Investigative file</li> </ol> </li> <li data-bbox="256 595 443 629">2. Interviews <ol data-bbox="284 638 571 707" style="list-style-type: none"> <li data-bbox="284 638 571 672">a. PREA Coordinator</li> <li data-bbox="284 680 493 714">b. Investigator</li> </ol> </li> <li data-bbox="256 723 663 757">3. Site Review Observations: <ol data-bbox="284 766 1054 799" style="list-style-type: none"> <li data-bbox="284 766 1054 799">a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p data-bbox="256 831 384 864">Findings:</p> <p data-bbox="256 873 408 907">115.71(a):</p> <p data-bbox="256 916 1481 1951">Juneau County Jail Policy 1001, section 1001.5 establishes the protocols for investigating sexual abuse and sexual harassment. The policy states, “The Office shall promptly, thoroughly and objectively investigate all allegations, including third party and anonymous reports, of sexual abuse or sexual harassment. Only investigators who have received office-approved special training shall conduct sexual abuse investigations.” The Agency indicated that over the past 12 months, there had been one allegation of sexual abuse resulting in an administrative investigation. The Facility provided the auditor with an investigative file for this allegation. The auditor was able to analyze the evidence reviewed in the administrative investigation to determine whether the agency investigated the allegation promptly, thoroughly, and objectively. Thoroughly means all potential evidence is collected and considered, including but not limited to: physical evidence, documentary evidence, video evidence, telephone records and recordings. Objectively means an investigation is conducted by an investigator without any bias or presumption. Promptly means within a reasonable amount of time to assure that evidence, including information from witnesses, victims and subjects is not lost or forgotten when allegations of sexual contact are made where a forensic medical exam is in order, the investigation starts immediately so as not to lose that evidence. The investigation into this allegation was evidenced to begin on the day following the initial report being made by the alleged victim. The investigation was evidenced to have included the collection of all potential evidence that this person had access to, including but not limited to: surveillance footage (when available), cell phone pictures, and interviewing potential witnesses. Lastly, the report provided indicated that the investigating staff investigated without bias or presumption and followed the evidence that was obtained. The allegation was determined to be unsubstantiated.</p> <p data-bbox="256 1991 1433 2067">During the on-site portion of this audit, this auditor interviewed the agency’s investigator - also serves as the agency’s PREA Coordinator. The PREA Coordinator</p>



revealed that the investigation begins immediately upon receiving the report. The investigator further stated that third-party reports are handled in the same way and are not investigated differently.

115.71(b):

During the pre-onsite portion of this audit, the agency indicated that investigators have not completed the specialized training listed in standard 115.34. During the on-site portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator indicated jail staff are dual certified in corrections and law enforcement and are trained to conduct investigations, but have not received the specialized training required by standard 115.34.

115.71(c):

During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided the above referenced policy and investigative file as evidence of their compliance. Policy 1001, section 1001.5.2 list the investigators responsibilities to include:

- (a) Gather and preserve direct and circumstantial evidence, including any available physical and biological evidence and any available electronic monitoring data.
- (b) Interview alleged victims, suspects and witnesses.
- (c) Review any prior complaints and reports of sexual abuse involving the suspect.
- (d) Conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution.
- (e) Assess the credibility of the alleged victim, suspect or witness on an individual basis and not by the person's status as a detainee or a member of the Juneau County Sheriff's Office.
- (f) Document in written reports a description of physical, testimonial, documentary and other evidence, the reasoning behind any credibility assessments, and investigative facts and findings.
- (g) Refer allegations of conduct that may be criminal to the District Attorney for possible prosecution, including any time there is probable cause to believe a detainee sexually abused another detainee in the Temporary Holding Facility.
- (h) Cooperate with outside investigators and remain informed about the progress of any outside investigation.

During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed the auditor that in the event of an allegation the first steps in initiating an investigation are: the PREA Coordinator would assign a lead investigator (typically the PREA Coordinator). This would occur immediately upon receiving the report. The assigned investigator would be responsible for gathering and preserving direct and circumstantial evidence, begin interviewing alleged victims, suspected perpetrators, any electronic monitoring or other electrically stored evidence, and witnesses. In cases where circumstantial evidence exists and it is believed that a crime has potentially occurred, Juneau County Jail personnel would be responsible for safeguarding it. Where appropriate, all allegations are referred for criminal investigation.

115.271(d):

During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided the above referenced investigative file as evidence of their compliance. During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed the auditor that in the event the program discovers evidence that a prosecutable crime may have taken place, the investigator would consult with prosecutors as to whether to conduct compelled interviews.

115.271(e):

During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided the above referenced Policy and investigative file as evidence of their compliance. Policy 1001, section 1001.5.4 establishes, "No detainee who alleges sexual abuse shall be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation."

During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed this auditor that the judging the credibility of an alleged victim, suspect, or witness is done in an individual basis and is assessed objectively without a presumption that one person is more credible than another until the assessment of credibility shows one way or another. The investigator further provided that under no circumstances would an inmate who alleges sexual abuse be required to a polygraph examination or truth-telling device as a condition for proceeding with an investigation. There were no residents that the Facility classified as having reported sexual abuse. The auditor attempted to corroborate this report by reviewing confidential resident case files and during resident and staff interviews. No inmates who reported a sexual abuse were discovered. As a result, this auditor was unable to question any inmates who reported prior sexual abuse in this facility to inquire whether or not the resident would be/had been required to take a polygraph test as a condition for the facility proceeding with a sexual abuse investigation.

115.71(f):

Juneau County Jail Policy 1001, section 1001.5.3 establishes the protocols for administrative investigations. The policy states, "Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse. The departure of the alleged abuser or victim from the employment or control of this office shall not be used as a basis for terminating an investigation."

During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed this auditor that administrative investigations do include an effort to determine whether staff actions or failures to act contributed to the abuse. The investigator further established that during interviews and evidence gathering they look for the existence of staff neglect, violation of the standards of employee conduct, and whether staff maintained fidelity with the agency's policies and procedures. Additionally, the investigator reported that all administrative investigations are documented in written reports that include: a description of all physical and testimonial evidence; all questions asked of these

people; a list of and responses of all witnesses and staff.

115.71(g):

During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed this auditor that criminal investigations (similar to administrative investigations) are documented and retained pursuant to the Agency's record retention policy. The investigator further communicated that the information includes a thorough description of any evidence obtained.

115.71(h):

During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided Policy 1001. Section 1001.5.2(g) states, "Refer allegations of conduct that may be criminal to the District Attorney for possible prosecution, including any time there is probable cause to believe a detainee sexually abused another detainee."

During the pre-onsite portion of this audit, the Agency indicated that over the past 12 months, there had been no criminal investigations that had taken place.

115.71(i):

During the pre-onsite portion of this audit, the agency indicated compliance with this provision and provided Policy 1001 as evidence of their compliance. Policy 1001, section 1001.8 establishes "The Office shall retain all written reports from administrative and criminal investigations pursuant to this policy for as long as the alleged abuser is held or employed by the Office, plus five years."

115.71(j):

During the onsite portion of this audit, this auditor interviewed the Agency's investigator/PREA Coordinator. The investigator informed this auditor that the departure of the alleged abuser or victim from the employment or control of the facility or agency does not terminate the investigation pending. The investigator informed this auditor that efforts would be continued to complete the investigation. The investigator further indicated this is a requirement of Policy 1001.

115.71(k): Auditor is not required to audit this provision.

115.71(l):

All investigations are completed internally; therefore this provision is not applicable.

**Corrective Action Needed:**

Ensure that at least one staff that investigates sexual abuse allegations receive training in conducting such investigations in confinement settings per standard 115.34.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the

corrective action period, the Agency provided the auditor with documentation that one staff member that investigates sexual abuse investigations received the specialized PREA investigation training required by standard 115.34.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

115.72	Evidentiary standard for administrative investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. Investigative records/reports for allegations of sexual abuse or sexual harassment</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> </ol> <p>Findings:</p> <p>115.72(a):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with Policy 1001: Prison Rape Elimination. Policy 1001, Section 1001.5.5 establishes “All completed investigations shall be forwarded to the Sheriff. The Sheriff shall review the investigation and determine whether any allegations of sexual abuse or sexual harassment have been substantiated by a preponderance of the evidence “</p> <p>During the onsite portion of this audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator informed this auditor that the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment is a preponderance of evidence standard.</p> <p>Based upon the review and analysis of all the available evidence, the auditor has determined that the agency is fully compliant with the provision of this standard.</p>

<b>115.73</b>	<b>Reporting to inmates</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. Investigative file</li> <li>d. JCSO Policy 606 Prison Rape Elimination act</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Sheriff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.73(a),(c) &amp; (d):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 2.(e)(i) establishes, "Following a sexual abuse investigation, the assigned investigator informs the alleged victim of the disposition. During the inmate's current incarceration, and unless the allegation is unfounded, the investigator will advise the alleged victim when:</p> <ol style="list-style-type: none"> <li>(1) the alleged staff perpetrator is no longer posted within the inmate's unit;</li> <li>(2) the alleged staff perpetrator is no longer employed by the JCSO;</li> <li>(3) the JCSO learns that the alleged staff or inmate perpetrator has been indicted on a charge related to sexual abuse within the facility; or</li> <li>(4) the JCSO learns that the alleged staff or inmate perpetrator has been convicted on a charge related to sexual abuse within the facility." <p>The agency indicated that over the past 12 months, there had been one allegation of sexual abuse resulting in an administrative investigation. The allegation was unsubstantiated. Review of the investigative file did not include any indication or notation that the victim was notified that the allegation was unsubstantiated. The facility indicated that there had been no substantiated allegations of sexual abuse committed by a staff member or inmate against an inmate in the past 12 months</p> <p>During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordination indicated that following an investigation, Juneau County Jail should inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded but may not have happened in all cases.</p> <p>115.73(b):</p> <p>During the pre-onsite portion of this audit, the Facility indicated that this provision was not applicable as all investigations are completed internally. There were no</p> </li></ol>

investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months.

115.73(e):

During the pre-onsite portion of this audit, the Facility indicated it does not have a policy that all notifications to inmates described under this standard are documented.

115.73(f): the Auditor is not required to audit this provision.

**Corrective Action Needed:**

1. Ensure that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency and the status of the abusers per provisions (c) and ((d) of this standard.

2. Revise and implement policy to ensure that all notifications to inmates described under this standard are documented.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 606 which is a new policy that was developed and Implemented. Section 606.7.2 of this policy addresses reporting to inmates and meets the requirements of this standard.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.76</b>	<b>Disciplinary sanctions for staff</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.76(a):  During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided this auditor with the Agency’s PREA Policies in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 2(f)(i) establishes, “Employee Disciplinary Sanctions  i) Employees are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse/harassment policies.” Policy 1001, section 1001.5.5 indicates, “All personnel shall be subject to disciplinary sanctions up to and including termination for violating this policy.”</p> <p>During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that any staff that violates the agency PREA policies would be subject to disciplinary sanctions up to and including termination.</p> <p>115.76(b):  During the pre-onsite portion of this audit, the Facility indicated that there were no staff from the facility violated the agency’s sexual abuse or sexual harassment policies in the past 12 months. Policy G2.20 and Policy 1001 both indicate that termination is the presumptive disciplinary sanction for staff who engage in sexual abuse.</p> <p>115.76(c):  During the pre-onsite portion of this audit, the Facility provided Policy G2.20 in support of their compliance with this standard in its PAQ responses. Policy G2.20, section 2(f)(iii) establishes, “Disciplinary sanctions for other violations of policy relating to sexual abuse/harassment, such as failure to report sexual abuse, are based on the nature and circumstances of the incident, the employee’s conduct history, and the sanctions imposed for comparable offenses by other employees with similar histories.”</p> <p>The facility reported that over the past 12 months there have been no staff from the facility who have been disciplined, short of termination, for violation of agency sexual</p>



abuse or sexual harassment policies (other than actually engaging in sexual abuse).

During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that any staff that violated the agency PREA policies would be subject to commensurate disciplinary sanctions. The PREA Coordinator confirmed that there had been no disciplinary action taken on staff who had been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse).

115.76(d):

During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in its PAQ responses. Policy 1001, section 1001.5.5 establishes, "All terminations for violations of this policy, or resignations by members who would have been terminated if not for their resignation, shall be criminally investigated unless the activity was clearly not criminal and reported to any relevant licensing body." The Facility indicated that in the past 12 months, there were no 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, that were reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies.

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

**115.77 Corrective action for contractors and volunteers**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)
  - a. Juneau County Jail PAQ responses
  - b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct
  - c. JCSO Policy 1001: Prison Rape Elimination
2. Interviews
  - a. PREA Coordinator
3. Site Review Observations:
  - a. Observations during on-site review of physical plant

**115.77(a):**

During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in PAQ responses. Policy 1001, section 1001.5.5 establishes, "Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with detainees and reported to any relevant licensing bodies."

The facility indicated that over the past 12 months, there had been no instances where contractors or volunteers had been reported to law enforcement agencies or relevant licensing bodies for engaging in sexual abuse of residents. During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that any contractor or volunteer who engages in sexual abuse would be prohibited from working at the facility permanently. The PREA Coordinator confirmed that there had been no instances where contractors or volunteers had been reported to law enforcement agencies or relevant licensing bodies for engaging in sexual abuse of residents.

**115.77(b):**

During the pre-onsite portion of this audit, the Facility provided Policy 1001 in support of their compliance with this standard in PAQ responses. Policy 1001, section 1001.5.5 establishes, "The Sheriff shall take appropriate remedial measures and consider whether to prohibit further contact with detainees by a contractor or volunteer." The Facility indicated that the Contractor/Volunteer's access to residents would be immediately suspended pending the investigation's outcome.

During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that if a contractor or volunteer is found to have committed sexual misconduct, the facility would investigate. The contractor or volunteer would not be allowed in the facility and would not be allowed contact with the inmates pending the investigation's outcome.

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

<b>115.78</b>	<b>Disciplinary sanctions for inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy J7.3: Inmate Discipline</li> <li>c. JSCO Policy 600 Inmate Discipline</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings):</p> <p>115.78(a-g):</p> <p>During the pre-onsite portion of this audit, the Facility provided Policy J7.3 in support of their compliance with this standard in its PAQ responses. Policy J7.3 establishes a formal disciplinary process for inmates. While the policy establishes a formal disciplinary process it does not specifically address all the provisions of this standard. The Facility indicated that over the past 12 months, there have been no administrative or criminal findings of guilt for inmate-on-inmate sexual abuse that occurred at the facility. Review of the policy indicates it does consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. The policy does not indicate the following; If the sanction would depend on the nature of the abuse, the inmate's disciplinary history, and comparable offenses; That the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation; The agency disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact; and prohibit all sexual activity between inmates and may discipline inmates for such activity. An agency may not, however, deem such activity to constitute sexual abuse if it determines that the activity is not coerced.</p> <p>During the pre-onsite portion of this audit, the Facility indicated that it does offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse.</p> <p><b>Corrective Action Needed:</b></p> <p>Revise policy to address all provisions of this standard.</p> <p>Final Audit Report Reassessment:</p> <p>During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 600. This is a</p>

new policy that was developed and implemented and addresses the requirements of this standard.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="256 262 558 293"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1366 369">The following evidence was analyzed in making the compliance determination</p> <ol data-bbox="256 383 1366 831" style="list-style-type: none"> <li>1. Evidence Reviewed (documents, interviews, site review): <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ Responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. JSCO Policy 606: Prison Rape Elimination Act</li> <li>e. JSCO Policy 708: Health Appraisals</li> </ol> </li> <li>2. Interviews with the following: <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Medical Health staff</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p data-bbox="256 913 1469 987">115.81 (a-b) Juneau County Jail is not a prison; therefore these three provisions are not applicable.</p> <p data-bbox="256 1025 1433 1099">115.81 (c) Review of Juneau County jail policies did not reveal requirements per this provision</p> <p data-bbox="256 1137 1465 1379">115.81(d) JCSO Policy G2.20, section 1.f.(xii) establishes, “The department shall use information from the risk screening to inform housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.” Per an interview with the PREA Coordinator, she confirmed information related to sexual victimization or abuse is limited to staff on a need to know basis.</p> <p data-bbox="256 1417 1442 1576">115.81(e) Review of Juneau County jail policies did not reveal requirements per this provision. Per interviews with medical staff, informed consent is obtained from inmates before reporting prior sexual victimization that did not occur in not in an institutional setting.</p> <p data-bbox="256 1615 676 1646"><b>Corrective Action Needed:</b></p> <p data-bbox="256 1684 1481 1890">Establish a policy and procedure that ensures If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening.</p> <p data-bbox="256 1928 1481 2087">Establish a policy and procedure that ensures medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18.</p>

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with Policy 606 and 708. These were new policies that were developed and implemented. Section 606.10 of policy 606 addresses the requirement of provision (e) of this standard. Policy 708 addresses the requirement of provision (c) of this standard.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.

<b>115.82</b>	<b>Access to emergency medical and mental health services</b>
	<p data-bbox="256 188 983 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 300"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1374 376">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 383 1358 752" style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Medical staff</li> <li>b. Security Staff and Non-Security Staff First Responders</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p data-bbox="256 790 384 826">Findings:</p> <p data-bbox="256 833 1461 1115">115.82(a-d) During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with its PREA policies. Policy 1001, section 1001.5.4 establishes, “Detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment. Treatment services shall be 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.” Policy G2.20, section 2.(b) establishes,</p> <p data-bbox="256 1122 1477 1323">“i) Inmates who report they have been sexually penetrated, or who are suspected to be victims of sexual penetration while in JCSO custody, are screened by the facility medical staff and transported for hospital care when medically appropriate. Medical staff takes a history and performs an examination to document the extent of physical injury and provide medical care as needed.</p> <p data-bbox="256 1330 1477 1451">ii) Per the outside investigating agencies investigation protocol and hospital protocols, the inmate may be transported to the hospital for forensic evaluation by hospital staff at the direction of the responding detective.</p> <p data-bbox="256 1458 1414 1538">iii) Provisions are made for testing for sexually transmitted diseases (for example, HIV, gonorrhea, hepatitis and other diseases) and counseling, as appropriate.</p> <p data-bbox="256 1545 1461 1626">iv) Where the alleged perpetrator is charged with rape, he will be tested for HIV, and the test results will be provided to the victim and the district attorney’s office.</p> <p data-bbox="256 1632 1461 1713">v) Prophylactic treatment and follow-up for sexually transmitted diseases are offered to victims, as appropriate.”</p> <p data-bbox="256 1742 1445 2069">Policies indicate inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; and inmate victims of sexual abuse while incarcerated shall be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Inmates are transported to a local hospital for forensic exams.</p>

During the onsite portion of this audit, this auditor interviewed the medical staff. They stated inmate victims are escorted to the medical department for emergency medical treatment and transported to a local hospital when medically appropriate.

During the onsite portion of this audit, this auditor interviewed security and non-security staff first responders. The facility indicated that all staff are the facility's first responders. This auditor interviewed Random staff and asked them about the first responder protocol. All staff indicated in the event they were the first to respond or learn of a sexual assault, they would separate victim and perpetrator are separated, call for additional staff, notify the supervisor, secure the crime scene and contact medical or call for an ambulance if required. No staff reported that they had to respond to an allegation of sexual abuse.

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



<p><b>115.83</b></p>	<p><b>Ongoing medical and mental health care for sexual abuse victims and abusers</b></p>
<p><b>Auditor Overall Determination:</b> Meets Standard</p>	
<p><b>Auditor Discussion</b></p>	
<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Medical staff</li> <li>b. Security Staff and Non-Security Staff First Responders</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.83(a-g)</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with these provisions and provided this auditor with its PREA policies. Policy 1001, section 1001.5.4 establishes, "Detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment. Treatment services shall be 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." Policy G2.20, section 2.(b) establishes,</p> <p>"i) Inmates who report they have been sexually penetrated, or who are suspected to be victims of sexual penetration while in JCSO custody, are screened by the facility medical staff and transported for hospital care when medically appropriate. Medical staff takes a history and performs an examination to document the extent of physical injury and provide medical care as needed.</p> <p>ii) Per the outside investigating agencies investigation protocol and hospital protocols, the inmate may be transported to the hospital for forensic evaluation by hospital staff at the direction of the responding detective.</p> <p>iii) Provisions are made for testing for sexually transmitted diseases (for example, HIV, gonorrhea, hepatitis and other diseases) and counseling, as appropriate.</p> <p>iv) Where the alleged perpetrator is charged with rape, he will be tested for HIV, and the test results will be provided to the victim and the district attorney's office.</p> <p>v) Prophylactic treatment and follow-up for sexually transmitted diseases are offered to victims, as appropriate."</p> <p>During the onsite portion of this audit, this auditor interviewed the medical staff. The medical staff indicated the Juneau Jail offers medical and mental health evaluations and, as appropriate, follow-up services and treatment to all inmates who have been victimized by sexual abuse. Inmates will be offered all lawful pregnancy-related medical services; prophylactic treatment and follow-up for sexually transmitted or other communicable diseases; counseling and testing; and will be referred to the</p>	

mental health staff or community providers for crisis intervention as necessary. Medical staff when asked, considered the level of care comparable to the community level of care. Victims are provided services without cost whether the victim names the abuser or cooperates with any investigation.

115.83(h)

Juneau County jail is not a prison, therefore this provision is not applicable.

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

<b>115.86</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JCSO Policy 1001: Prison Rape Elimination</li> <li>d. Documentation of criminal and administrative investigations</li> <li>e. Sexual abuse incident review form (SAIR Report)</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.86(a)-(b):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with Policy G2.20. Section 2(j) of this policy establishes, "Sexual Abuse Incident Reviews</p> <ol style="list-style-type: none"> <li>i. Unless the allegation was determined to be unfounded, the JCSO conducts a sexual abuse incident review ordinarily within 30 days of the conclusion of every sexual abuse investigation.</li> <li>ii. The PREA coordinator, facility administrator, investigators, and medical and mental health practitioners conduct the review and document any recommendations for improvement. "</li> </ol> <p>The facility completed one administrative sexual abuse investigation in the past 12 months. The investigation determined the allegation was unsubstantiated. This auditor reviewed documentation of the completed administrative investigations into the above-referenced investigation. This documentation included a completed SAIR report which was completed within 30 days of the conclusion of the investigation. The SAIR Report includes a date under the signature block of the PREA Coordinator.</p> <p>.</p> <p>115.286(c):</p> <p>A review of the SAIR report referenced above reveals that the review team was comprised of only the PREA Coordinator. During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that this was the first sexual abuse incident review that was documented. The PREA Coordinator is also the Jail Administrator and was involved in the investigation. Due to the nature of the allegation and that it was reported 30 days after the alleged incident, the victim wasn't taken to medical. It is recommended that all future</p>

reviews include a team as indicated per policy and seek input from line supervisors and investigators

115.286(d)-(e):

JCSO Policy 1001, Section 1001.7.1 establishes the review shall;

"(a) Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse.

(b) Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender or intersex identification, status or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility.

(c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.

(d) Assess the adequacy of staffing levels in that area during different shifts.

(e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.

The review team shall prepare a report of its findings, including any determinations made pursuant to this section and any recommendations for improvement. The report shall be submitted to the Sheriff and the PREA Coordinator. The Sheriff or the authorized designee shall implement the recommendations for improvement or shall document the reasons for not doing so. "

A review of the SAIR report referenced above reveals that the SAIR includes the required items. No recommendation were noted. During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that the SAIR form examines paragraphs (d)(1)-(d)(5) of this provision. The PREA Coordinator reported that the SAIR report is prepared indicating its findings, including any recommendations needed. The PREA Coordinator also reported that she is always a member of the SAIR team ; additionally, once the review has been completed, she is responsible for ensuring that the facility follows through and implements any corrective action developed.

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

<b>115.87</b>	<b>Data collection</b>
	<p data-bbox="256 188 983 224"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="256 264 557 300"><b>Auditor Discussion</b></p> <p data-bbox="256 340 1374 376">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="256 383 1358 875" style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County Jail PAQ responses</li> <li>b. JSCO Policy G2.20: Prison Rape Elimination Act (PREA)/Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. Survey of Sexual Violence form</li> <li>e. PREA Annual Report</li> <li>f. Investigative File</li> <li>g. Agency website</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. Jail Administrator/PREA Coordinator</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p data-bbox="256 913 384 949">Findings:</p> <p data-bbox="256 956 408 992">115.87(a):</p> <p data-bbox="256 999 1469 1574">During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with the Facility’s PREA Policies and PREA Annual Report. Policy G2.20, section 2(k)(i) establishes, “The PREA coordinator and investigative personnel securely maintain uniform data for allegations of sexual abuse, including at a minimum, that necessary to answer all questions from the most recent Survey of Sexual Violence conducted by the Department of Justice.” Policy 1001, section 1001.3(i) establishes that the PREA Coordinator is responsible for establishing a process that includes the use of a standardized form and set of definitions to ensure accurate, uniform data is collected for every allegation of sexual abuse at facilities under this agency’s direct control. The data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence, conducted by DOJ, or any subsequent form developed by DOJ and designated for lockups.. The data shall be aggregated at least annually.</p> <p data-bbox="256 1612 464 1648">115.87(b), (c):</p> <p data-bbox="256 1655 1461 2067">During the pre-onsite portion of this audit, the Facility interviewed the PREA Coordinator. She stated she is responsible for collecting, compiling and aggregating the required data and ensuring that such data includes the information necessary to answer all questions for the most recent version of the Survey of Sexual Violence.. The Facility’s 2021 annual report is posted on the Agency website and was reviewed by this auditor. The 2021 annual report included aggregate information on the following types of incidents: 1) inmate-on-inmate sexual abuse, 2) inmate-inmate sexual harassment, 3) staff-inmate sexual harassment, 4. Staff-inmate sexual abuse. The annual report compares the current reporting year’s data with that of the prior two years. The Facility also provided a copy of the completed Survey of Sexual</p>

Violence conducted by the Department of Justice.

115.87(d):

During the pre-onsite portion of this audit, this auditor interviewed the PREA Coordinator. She indicated that the facility maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Additionally, this information was made available and reported by the facility in its Annual Report that is posted on its website.

115.87(e):

During the pre-onsite portion of this audit, the Facility indicated that this standard was not applicable as the agency does not contract with other entities for the confinement of its inmates.

During the onsite portion of the audit, this auditor interviewed the Jail Administrator. The Jail Administrator reported that Juneau County Jail does not contract with other private or public entities for the confinement of its inmates.

115.87(f):

Per review of completed SSV forms, they were completed by June 30 of each year.

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

<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. Juneau County PAQ responses</li> <li>b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct</li> <li>c. JSCO Policy 1001: Prison Rape Elimination</li> <li>d. PREA Annual Reports (2021 &amp; 2022)</li> <li>e. Agency website</li> </ol> </li> <li>2. Interviews <ol style="list-style-type: none"> <li>a. PREA Coordinator</li> <li>b. Agency Head</li> </ol> </li> <li>3. Site Review Observations: <ol style="list-style-type: none"> <li>a. Observations during on-site review of physical plant</li> </ol> </li> </ol> <p>Findings:</p> <p>115.88(a)-(b):</p> <p>During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with the Facility’s PREA Policies and PREA Annual Report. Policy 1001, section 1001.7.2 establishes, “The facility shall conduct an annual review of collected and aggregated incident-based sexual abuse data. The review should include, as needed, data from incident-based documents, including reports, investigation files and sexual abuse incident reviews. The purpose of these reviews is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training. An annual report shall be prepared that includes:</p> <ol style="list-style-type: none"> <li>(a) Identification of any potential problem areas.</li> <li>(b) Identification of any corrective actions taken.</li> <li>(c) Recommendations for any additional corrective actions.</li> <li>(d) A comparison of the current year’s data and corrective actions with those from prior years.</li> <li>(e) An assessment of the Office’s progress in addressing sexual abuse.</li> </ol> <p>The report shall be approved by the Sheriff and made readily available to the public through the office website or, if it does not have one, through other means. Material may be redacted from the reports when publication would present a clear and specific threat to the safety and security of the Temporary Holding Facility. However, the nature of the redacted material shall be indicated. All aggregated sexual abuse data from Juneau County Sheriff's Office facilities and private facilities with which it contracts shall be made readily available to the public at least annually through the office website or, if it does not have one, through other means. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.”</p> <p>The 2021 annual report included aggregate information on the following types of</p>

incidents: 1) inmate-on-inmate sexual abuse, 2) inmate-inmate sexual harassment, 3) staff-inmate sexual harassment, 4. Staff-inmate sexual abuse. The annual report compares the current reporting year's data with that of the prior two years. The annual report does not contain an assessment of the Office's progress in addressing sexual abuse

During the onsite portion of this audit, the auditor interviewed the Agency Head and PREA Coordinator. The PREA Coordinator reported she keeps statistics. If certain incident(s) become more prevalent then they would be targeted and analyzed to ensure proper corrective measures are in-tact and or need strengthening. Data is securely retained on password secured computer data bases.

115.88(c):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided a link to the Agency's website. A review of this website reveals that it contains a link to Juneau County Jail's Annual PREA Report. During the onsite portion of the audit, this auditor interviewed the Agency Head. The Sheriff of Juneau County Jail reported that he reviews and approves the annual report pursuant to this provision.

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115.88(d):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and reported that, no redactions are made. Review of the Agency's Annual Report evidences that no redactions are made and the report includes aggregate data

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During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that only personal identifying information (PII) is not included and/or redacted from the annual report. The PREA Coordinator reported that nothing is redacted from the approved annual report prior to its publication on the Agency's website.

**Corrective Action Needed:**

The annual report should include an assessment of the Jail's progress in addressing sexual abuse and any corrective action taken.

Final Audit Report Reassessment:

During the post-onsite audit portion of this audit, the auditor identified that the agency was not fully compliant with all provisions of this standard. During the corrective action period, the Agency provided the auditor with the 2021 annual report and the Agency PREA Coordinator confirmed that reviews did not recommend any corrective action. The 2022 annual report was provided and included the Jail's progress in addressing sexual abuse.

Based upon the review and analysis of all the available evidence, the auditor has determined that the agency has been able to remedy any previously reported deficiency and is fully compliant with this standard.



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

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

The following evidence was analyzed in making the compliance determination:

1. Documents: (Policies, directives, forms, files, records, etc.)
  - a. Juneau County PAQ responses
  - b. JCSO Policy G2.20: Prison Rape Elimination Act (PREA) Sexual Misconduct
  - c. JSCO Policy 1001: Prison Rape Elimination
  - d. PREA Annual Report (Year 2021)
  - e. Agency website
2. Interviews
  - a. PREA Coordinator
  - b. Agency Head
3. Site Review Observations:
  - a. Observations during on-site review of physical plant

Findings:

115.89(a):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided this auditor with the Facility’s PREA Policies and PREA Annual Report. Policy G2.20, section 2(k) states, “The PREA coordinator and investigative personnel securely maintain uniform data for allegations of sexual abuse.”

During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that all data is securely retained on password secured computer data bases. While onsite, this auditor observed inactive staff computers. Each computer observed required a username and password to navigate.

115.89(b):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided the PREA Policy and a link to the Agency’s website. Policy 1001, section 1001.7.2 in part establishes, “All aggregated sexual abuse data from Juneau County Sheriff’s Office facilities and private facilities with which it contracts shall be made readily available to the public at least annually through the office website or, if it does not have one, through other means. Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.” A review of this website reveals that it contains a link to Juneau County Jail’s Annual PREA Report.

115.89(c):

During the pre-onsite portion of this audit, the Facility indicted compliance with this provision and provided a link to the Agency’s website, PREA policies and Annual Report. Policy 1001, section 1001.7.2 in part establishes, “Before making aggregated sexual abuse data publicly available, all personal identifiers shall be removed.” the

Facility indicated compliance with this provision and indicated that before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. This auditor was able to confirm that personal identifiers have been removed by review of the Agency's website and the annual report that is publicly available

During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator reported that only personal identifying information (PII) is not included and/or redacted from the annual report.

115.89(d):

During the pre-onsite portion of this audit, the Facility indicated compliance with this provision and provided PREA Policy 1001. Policy 1001, section 1001.8 establishes, "All other data collected pursuant to this policy shall be securely retained for at least 10 years after the date of the initial collection unless federal, state or local law requires otherwise."

During the onsite portion of the audit, this auditor interviewed the PREA Coordinator. The PREA Coordinator indicated she had retained all data and prior annual reports on her password-protected computer.

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

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> <li>1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> <li>a. JCSO Website</li> </ol> </li> <li>2. Pre/Onsite/Post-Audit Observations <ol style="list-style-type: none"> <li>a. General observations during the audit process (Notice of Audit postings)</li> </ol> </li> </ol> <p>Findings:</p> <p>115.401(a)-(b):</p> <p>Juneau County Sheriff's Office is a single facility agency and this is the first PREA audit of the Facility.</p> <p>115.401(h):</p> <p>During the onsite portion of this audit, this auditor had access to, and the ability to observe, all areas of the audited facility. The facility provided this auditor with access to the facility and its staff and inmates.</p> <p>115.401(i):</p> <p>During the pre-audit, onsite, and post-onsite portion of this audit this auditor was permitted to request and received copies of any relevant documents that this auditor requested, including but not limited to: facility logs, resident files, personnel files, policy and procedure manuals, postings, inmate handbooks, intake and classification documents, etc.</p> <p>115.401(m):</p> <p>During the onsite portion of this audit this auditor was permitted to conduct private interviews with inmates and staff in various rooms in the facility. The rooms did not have video or voice recording capabilities.</p> <p>115.401(n):</p> <p>During the pre-audit portion of this audit inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. While onsite this auditor asked all inmates interviewed whether they were made aware of and saw this auditor's notices that were displayed throughout the facility. A majority of the inmates interviewed informed this auditor that they have seen the posting.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Juneau County Sheriff's Office is a single facility agency and this is the first PREA audit of the Facility.

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

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

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	na
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need	yes

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



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

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

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

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

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

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

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

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



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

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

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

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

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

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

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

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



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

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

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

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

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

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

<b>115.51 (b)</b>	<b>Inmate reporting</b>	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
<b>115.51 (c)</b>	<b>Inmate reporting</b>	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.51 (d)</b>	<b>Inmate reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
<b>115.52 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no

<b>115.52 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes



<b>115.52 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

<b>115.52 (f)</b>	<b>Exhaustion of administrative remedies</b>	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
<b>115.52 (g)</b>	<b>Exhaustion of administrative remedies</b>	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

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

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

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

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

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



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

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

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

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

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

<b>115.78 (a)</b>	<b>Disciplinary sanctions for inmates</b>	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
<b>115.78 (b)</b>	<b>Disciplinary sanctions for inmates</b>	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
<b>115.78 (c)</b>	<b>Disciplinary sanctions for inmates</b>	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
<b>115.78 (d)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	no
<b>115.78 (e)</b>	<b>Disciplinary sanctions for inmates</b>	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
<b>115.78 (f)</b>	<b>Disciplinary sanctions for inmates</b>	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
<b>115.78 (g)</b>	<b>Disciplinary sanctions for inmates</b>	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

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

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



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

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

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

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

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

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

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