

# Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim       Final

Date of Interim Audit Report:       N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report:      7/24/2020

## Auditor Information

Name: Patrick J. Zirpoli	Email: pzirpoli@ptd.net
Company Name: Patrick J. Zirpoli LLC	
Mailing Address: 149 Spruce Swamp Road	City, State, Zip: Milanville, PA 18443
Telephone: 570-729-4131	Date of Facility Visit: 06/29/2020 – 06/30/2020

## Agency Information

Name of Agency: Merrimack County Department of Corrections			
Governing Authority or Parent Agency (If Applicable):			
Physical Address: 314 Daniel Webster Highway		City, State, Zip: Boscawen, NH, 03303	
Mailing Address: same as above		City, State, Zip:	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: <a href="https://merrimackcounty.net/inmate-information/prison-rape-eliminate-act-prea">https://merrimackcounty.net/inmate-information/prison-rape-eliminate-act-prea</a>			

## Agency Chief Executive Officer

Name: Ross Cunningham - Superintendent	
Email: RCunningham@mcdoc.net	Telephone: 603-796-3601

## Agency-Wide PREA Coordinator

Name: Benjamin Forge - Unit Manager	
Email: bforge@mcdoc.net	Telephone: 603-796-3663
PREA Coordinator Reports to: Dora Lavigne - Director	Number of Compliance Managers who report to the PREA Coordinator: NA

## Facility Information

**Name of Facility:** Merrimack County Department of Corrections

**Physical Address:** 314 Daniel Webster Highway

**City, State, Zip:** Boscawen, NH, 03303

**Mailing Address (if different from above):**

**City, State, Zip:**

**The Facility Is:**

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

**Facility Type:**

Prison

Jail

**Facility Website with PREA Information:** <https://merrimackcounty.net/inmate-information/prison-rape-eliminate-act-prea>

**Has the facility been accredited within the past 3 years?**  Yes  No

**If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):**

ACA

NCCHC

CALEA

Other (please name or describe:

N/A

**If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:**  
Annual Internal Operational Audit

### Warden/Jail Administrator/Sheriff/Director

**Name:** Ross Cunningham - Superintendent

**Email:** rcunningham@mcdoc.net

**Telephone:** 603-796-3601

### Facility PREA Compliance Manager

**Name:** Benjamin Forge - Unit Manager

**Email:** bforge@mcdoc.net

**Telephone:** 603-796-3664

### Facility Health Service Administrator N/A

**Name:** Kim Rose - Director of Nursing

**Email:** krose@mcdoc.net

**Telephone:** 603-796-3637

### Facility Characteristics

**Designated Facility Capacity:**

315

**Current Population of Facility:**

151

**Average daily population for the past 12 months:**

176

Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males
Age range of population:	18 and above
Average length of stay or time under supervision:	34.10 days
Facility security levels/inmate custody levels:	Minimum through Maximum
Number of inmates admitted to facility during the past 12 months:	2324
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	1051
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	418
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	<input checked="" type="checkbox"/> N/A
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input checked="" type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: <a href="#">Click or tap here to enter text.</a> <input type="checkbox"/> N/A
Number of staff currently employed by the facility who may have contact with inmates:	131
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	20
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	7
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	13
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	43

<b>Physical Plant</b>	
<p><b>Number of buildings:</b></p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	2
<p><b>Number of inmate housing units:</b></p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	12
<b>Number of single cell housing units:</b>	11
<b>Number of multiple occupancy cell housing units:</b>	2
<b>Number of open bay/dorm housing units:</b>	3
<b>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</b>	18
<b>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</b>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<b>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</b>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<b>Medical and Mental Health Services and Forensic Medical Exams</b>	
<b>Are medical services provided on-site?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<b>Are mental health services provided on-site?</b>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p><b>Where are sexual assault forensic medical exams provided? Select all that apply.</b></p>	<input type="checkbox"/> On-site <input checked="" type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input type="checkbox"/> Other (please name or describe: One Safe Place Family Justice Center)
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**Investigations**

**Criminal Investigations**

<p><b>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</b></p>	<p>1</p>
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<p><b>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</b></p>	<input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p><b>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</b></p>	<input type="checkbox"/> Local police department <input checked="" type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: ) <input type="checkbox"/> N/A
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**Administrative Investigations**

<p><b>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</b></p>	<p>1</p>
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<p><b>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</b></p>	<input checked="" type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p><b>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</b></p>	<input type="checkbox"/> Local police department <input checked="" type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: <input type="checkbox"/> N/A
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# Audit Findings

## Audit Narrative (including Audit Methodology)

### Pre-Onsite Audit Phase

#### Audit Planning and Logistics:

I had the opportunity to discuss the audit process and expectations of both parties with the PREA Coordinator Benjamin Forge. We coordinated the dates for the onsite audits at the facility. During these conversations we outlined an overall audit schedule and notified the facility of the estimated time of arrival onsite.

#### Posting Notice of the Audit:

I forwarded the audit posting to the Agency PREA Coordinator on April 27, 2020. The posting included the dates of the audit, purpose of the audit, my contact information and a statement regarding the confidentiality of any communication received. The postings were placed throughout the facility, including all housing units, visiting areas, recreational areas and all common areas. I verified the placement of the audit notices through time stamped photographs and during the facility tour, and the inmate and staff interviews. I did not receive any letters from inmates, nor staff.

#### Review of Agency and Facility Policies, Procedures and Supporting Documentation:

The PREA Coordinator provided me a flash drive containing all Merrimack County Department of Corrections Policies and Procedures related to the Prison Rape Elimination Act, as well as documentation that all Policies and Procedures were practiced on a daily basis. They also provided me a completed PRE-Audit Questionnaire. The Policies, Procedures, and Documents reviewed during this phase of the audit are listed under Onsite Audit, with all documentation reviewed during the course of the audit.

#### Outreach to Community Advocacy Organizations:

I contacted the Merrimack County Advocacy Center who provides victim advocacy. They knew of no issues at the facility.

### Onsite Audit Phase

#### Site Review:

*The audit was conducted during the Covid 19 Pandemic. The Agency and Auditor took all necessary precautions outlined by the Merrimack County Department of Corrections. These precautions included temperature check prior to entering the facility, questionnaire, universal masking for all staff, and visitors. During the facility tour social distancing was practiced. The staff and inmate interviews were conducted with the participants seated at minimum of 6 feet apart, and both wearing masks.*

The PREA Coordinator and I met on June 29, 2020 at approximately 8:00 a.m. to conduct a briefing and facility tour. We discussed the onsite portion of the audit, including facility tour, inmate and staff interview location, and document review. During the tour I had the opportunity to view all areas of the facility. I interacted with both staff and inmates, as well as observed the interaction between the staff and inmates. I was able to verify the location of cameras throughout the facility, as well as the camera monitor locations. While on the housing units I observed the related PREA information, Audit Posting, and applicable policies and procedures posted in the common areas, which are accessible to all inmates. These postings were further observed in common areas throughout the facility. While conducting the tour I reviewed log books on the housing units.

The inmate interviews began immediately following the facility tour. They were conducted on the housing units in a private room. These areas provided privacy for the interviews. The inmates were randomly selected from inmates on the housing units. During this process I interviewed inmates in the following categories:

Interview Type	Number
Random Inmate Interviews	11
Youthful Inmates	Facility does not house
Inmates with a Physical Disability	2
Inmates who are Blind, Deaf, or Hard of Hearing	1
Inmates who are Limited English Proficient	0
Inmates with a Cognitive Disability	3
Inmates who Identify as Lesbian, Gay or Bisexual	2
Inmates who identify as Transgender or Intersex	0
Inmates in Segregated Housing for High Risk of Sexual Victimization	0
Inmates who Reported Sexual Abuse	1
Inmates who Reported Sexual Victimization During Risk Screening	2
Total Inmate Interviews	22

During the interview process several targeted categories of inmates were not being housed at the facility. I conducted the interviews with all inmates in the same manner, a preamble to the interview was related to the inmate explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No inmates refused to speak with me. All inmates were asked questions related to the Random Inmate Interviews, and if they were in a targeted category, I asked those additional questions. During the interviews I utilized a copy of the initial PREA information received by inmates, and Screening form to visually stimulate the inmate's recollection of their initial intake process.

The staff interviews were conducted in various areas on both days of the audit. The facility was currently working three shifts, interviews were conducted on all shifts. During the process I interviewed staff in the following categories:

Interview Type	Number
Random Staff Interviews	12
Intermediate or Higher-Level Staff Conducting Unannounced Rounds and Intake Staff	3
Line Staff who Supervise Youthful Inmates	Not Applicable
Education and Program Staff who Work with Youthful Inmates	Not Applicable
Medical and Mental Health Staff	3
Administrative Staff	1
Volunteers and Contractors	0
Investigative Staff	1
Training Officer	1
Staff who Perform Screening	2
Staff who Supervise Inmates in Segregated Housing	1
Staff on the Sexual Abuse Incident Review Team	2
First Responders	1

PREA Coordinator	1
Warden	1
Total Staff Interviews	29

I conducted the interviews with all staff in the same manner, a preamble to the interview was related to the staff member explaining the purpose of the interview, and how they were selected and explaining to them that they did not have to speak with me if they choose not to. No staff refused to speak with me. All interviewed staff was asked questions related to the Random Staff Interviews, and if they were in a targeted category, they were then asked questions pertaining to that area. During the interviews I utilized a copy of the training they received and any documentation related to a specific targeted interview. These items were used to visually stimulate the staff's recollection on the daily practices at the facility.

The onsite documentation review was conducted during all days of the audit process. The onsite documentation was reviewed at the source, all files, and facility documents were retrieved by me. The following is a list of documentation reviewed during the Pre-Audit, Onsite Audit and Post Audit Phases, with the applicable standard to each.

<b>Documentation Reviewed Pre-Audit, Onsite Audit and Post Audit Phases</b>	<b>Applicable Standard</b>
Merrimack County Department of Corrections Policy Number: 4D-1-04 Policy Title: Sexual Assault Prison Rape Elimination Act Merrimack County Department of Corrections Policy Number: 7c-1-01 Policy Title: Standards of Conduct Merrimack County Anti-Harassment Policy & Reporting Procedure of Discrimination, Harassment, and Retaliation MCDOC Organizational Chart	Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
MCDOC Administrative Transfer Form US Department of Justice Contract Merrimack County Department of Corrections Inter-jurisdictional Transfer Report	Standard 115.12: Contracting with other entities for the confinement of inmates
MCDOC 2020 Staff Schedule MCDOC Policies: 2A-1-01 Security 2A-1-02 Control Room Security Procedures 2A-1-03 Control of Secure Doors 2A-1-04 Surveillance Equipment 2A-1-05 Perimeter Security Checks 2A-1-09 Inmate Supervision 4D-1-04 PREA Shift briefings and Security reports Shift log reports Central Camera List Staffing Analysis Staffing level memos Staffing plan	Standard 115.13: Supervision and Monitoring
MCDOC policy 2A-7-01 Juvenile Admissions	Standard 115.14: Youthful inmates



<p>MCDOC Policies:  2A-1-09 Inmate Supervision  2C-1-01 Searches  4C-1-06 Suicide Precaution and Intervention  4D-1-04 PREA  4D-1-07 Gender Identification  Guidance on Cross Gender and Transgender Searches Training</p>	<p>Standard 115.15: Limits to cross-gender viewing and searches</p>
<p>MCDOC Policies:  2A-5-01 Inmate Orientation  4C-1-07 Special Needs Treatment  6A-1-01 Inmate Rights  6B-2-01 Inmates with Disabilities  Spanish handouts and materials  Language Bank onsite Interpretation</p>	<p>Standard 115.16: Inmates with Disabilities and Inmates who are Limited English Proficient</p>
<p>MCDOC Policies:  4D-1-04 PREA  7B-1-01 Hiring and Employment Qualifications  7B-1-03 Promotions  7B-1-04 NCIC  7B-2-01 Staff Development  7C-1-01 Standards of Conduct  7D-8-05 Communication Between Staff and Inmates  Applicant review form  County Application  Disclosure of PREA Hiring and Promotions Checklist  Employee Acknowledgement  Completed Criminal History Checks</p>	<p>Standard 115.17: Hiring and Promotion Decisions</p>
<p>MCDOC Policies:  2A-1-01 Security  2A-1-02 Control Room Security Procedures  2A-1-03 Control of Secure Doors  2A-1-04 Surveillance Equipment  2A-1-05 Perimeter Security Checks  Central Camera List  Weekly Security Device Inspection Sheet</p>	<p>Standard 115.18: Upgrades to facilities and technologies</p>
<p>Merrimack County Advocacy Center Adult Advocacy Program Guidelines  Merrimack County Advocacy Center Referral form for MCDOC  Merrimack County Custodial &amp; Non-Custodial Sexual Assault Charts  Merrimack County Sexual Assault Resource Team Memorandum of Understanding  MCDOC Policies:  4D-1-04 PREA  State of New Hampshire Office of the Attorney General Sexual Assault: An Acute Care Protocol for Medical/Forensic Evaluation  Concord Hospital Information  Merrimack County Advocacy Center Interagency Agreement</p>	<p>Standard 115.21: Evidence Protocol and Forensic Medical Examination</p>

<p>MCDOC Policies:  4D-1-04 PREA  2019 PREA incidents  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation  Merrimack County Custodial &amp; Non-Custodial  Sexual Assault Charts  PREA Investigation Checklist</p>	<p>Standard 115.22: Policies to Ensure Referral of  Allegations for Investigations</p>
<p>MCDOC Policies:  4D-1-04 PREA  7B-2-01 Staff Development  7C-1-01 Standards of Conduct  7D-4-01 Policy and Procedure  7D-8-05 Communications Between Staff and  Inmates  Merrimack County Anti-Harassment Policy &amp;  Reporting Procedure of Discrimination,  Harassment, and Retaliation  PREA Training for Staff  Training Acknowledgement Forms  PREA pocket cards for staff</p>	<p>Standard 115.31: Employee Training</p>
<p>MCDOC Policies:  4D-1-04 PREA  7F-2-01 Citizen Involvement  2017 Orientation  PREA Volunteer and Contractor Training  Completed Acknowledgement Forms</p>	<p>Standard 115.32: Volunteer and Contractor  Training</p>
<p>MCDOC policies:  2A-4-01 Admissions  2A-5-01 Inmate Orientation  2A-6-01 Classification  6A-1-01 Inmate Rights  Booking Screening  Crisis Center Poster  Inmate Handbook  MCDOC Orientation materials  PREA Pamphlet  PREA Sign Off Form</p>	<p>Standard 115.33: Inmate Education</p>
<p>MCDOC Policies:  4D-1-04 PREA  Investigators Certificates</p>	<p>Standard 115.34: Specialized training:  Investigations</p>
<p>MCDOC Policies:  4D-1-04 PREA  4C-1-05 Mental Health Program  4D-1-02 Medical Administration Qualification  7B-2-01 Staff Development</p>	<p>Standard 115.35: Specialized training: Medical  and mental health care</p>

<p>MCDOC Policies:  4D-1-04 PREA  2A-4-01 Admissions  2A-6-01 Classifications  MCDOC Restrictive Housing Notification  Classification PREA Screening  Medical Screening Forms  Inmate Orientation</p>	<p>Standard 115.41: Screening for risk of victimization and abusiveness</p>
<p>MCDOC Policies:  4D-1-04 PREA  2A-6-01 Classification  4D-1-07 Gender Identification  Classification Notice  Classification PREA Screening  Inmate Orientation  Medical Screening Forms  PREA Screening</p>	<p>Standard 115.42: Use of screening information</p>
<p>MCDOC Policies:  4D-1-04 PREA  2A-6-01 Classification  2A-8-01 Isolation and Observation Cells  Classification Notice  Classification and MDT Meeting notes</p>	<p>Standard 115.43: Protective Custody</p>
<p>MCDOC Policies:  4D-1-04 PREA  Adult Advocacy Program Notice  Confidential Reporting Line Instructions  Crisis Center Pamphlet  Employee Rules and Regulations  PREA Pamphlet  PREA Staff reports  PREA Website Information  PREA Posters</p>	<p>Standard 115.51: Inmate reporting</p>
<p>MCDOC Policies:  4D-1-04 PREA  6A-1-01 Inmate Rights  6B-1-01 Grievance Process  Inmate Handbook  PREA Pamphlet</p>	<p>Standard 115.52: Exhaustion of administrative remedies</p>
<p>MCDOC Policies:  4D-1-04 PREA  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation  Community Resources  PREA Pamphlet  Inmate Handbook</p>	<p>Standard 115.53: Inmate access to outside confidential support services</p>

<p>MCDOC Policies:  4D-1-04 PREA  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation  Community Resources  PREA Pamphlet  Inmate Handbook</p>	<p>Standard 115.54: Third-party reporting</p>
<p>MCDOC Policies:  4D-1-04 PREA  7C-1-01 Standards of Conduct  7D-8-01 Inmate Records  Merrimack County Anti-Harassment Policy &amp;  Reporting Procedure of Discrimination,  Harassment, and Retaliation</p>	<p>Standard 115.61: Staff and agency reporting  duties</p>
<p>MCDOC Policies:  4D-1-04 PREA  2A-6-01 Classification  2019 PREA Summary Report</p>	<p>Standard 115.62: Agency protection duties</p>
<p>MCDOC Policies:  4D-1-04 PREA  Administrative Transfer Form  Sample Notification Form  Notification Letter</p>	<p>Standard 115.63: Reporting to other  confinement facilities</p>
<p>MCDOC Policies:  4D-1-04 PREA  2C-1-02 Preservation of Evidence  2019 PREA Incidents  Merrimack County Custodial &amp; Non-Custodial  Sexual Assault Charts  Staff Pocket card</p>	<p>Standard 115.64: Staff first responder duties</p>
<p>MCDOC Policies:  4D-1-04 PREA  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation  MOU CAC</p>	<p>Standard 115.65: Coordinated response</p>
<p>MCDOC Policies:  4D-1-04 PREA  SEA of NH, Inc., SEIU Local 1984 Contract  Merrimack County Rules and Regulations</p>	<p>Standard 115.66: Preservation of ability to  protect inmates from contact with abusers</p>
<p>MCDOC Policies:  4D-1-04 PREA  6A-1-01 Inmate Rights  6B-1-01 Grievance Process  7C-1-01 Standards of Conduct  7D-8-05 Communications Between Staff and  Inmates  Merrimack County Anti-Harassment Policy &amp;  Reporting Procedure of Discrimination,  Harassment, and Retaliation</p>	<p>Standard 115.67: Agency protection against  retaliation</p>

<p>MCDOC Policies:  4D-1-04 PREA  2A-6-01n Classification  2A-8-01 Isolation and Observation Cells  2019 Administrative Segregation  Classification Meeting Minutes</p>	<p>Standard 115.68: Post-allegation protective custody</p>
<p>MCDOC Policies:  4D-1-04 PREA  7C-1-01 Standards of Conduct  Employee Rules and Regulations  Facility Investigations</p>	<p>Standard 115.71: Criminal and administrative agency investigations</p>
<p>MCDOC Policies:  4D-1-04 PREA  7C-1-01 Standards of Conduct  Employee Rules and Regulations  Facility Investigations</p>	<p>Standard 115.72: Evidentiary standard for administrative investigations</p>
<p>MCDOC Policies:  4D-1-04 PREA  Facility Investigations  PREA notifications to inmates</p>	<p>Standard 115.73: Reporting to inmates</p>
<p>MCDOC Policies:  7C-1-01 Standards of Conduct  Merrimack County Anti-Harassment Policy &amp; Reporting Procedure of Discrimination, Harassment, and Retaliation  Employee Rules and Regulations  Facility Investigations</p>	<p>Standard 115.76: Disciplinary sanctions for staff</p>
<p>MCDOC Policies:  4D-1-04 PREA  7F-2-01 Citizen Involvement  2017 Orientation  Volunteer Acknowledgements  Volunteer Application  Facility Investigations</p>	<p>Standard 115.77: Corrective action for contractors and volunteers</p>
<p>MCDOC Policies:  4D-1-04 PREA  3A-1-01 Inmate Discipline  2019 PREA Incidents  Facility Investigations</p>	<p>Standard 115.78: Disciplinary sanctions for inmates</p>
<p>MCDOC Policies:  4D-1-04 PREA  4C-1-04 Health Screening and Assessment  4C-1-05 Mental Health Program  7D-8-01 Inmate Records  Booking and Screening Forms  Mental Health Screening Forms  Individual Health Assessments &amp; Suicide Screenings  Release of Information forms</p>	<p>Standard 115.81: Medical and mental health screenings; history of sexual abuse</p>

<p>MCDOC Policies:  4D-1-04 PREA  4C-1-04 Health Screening and Assessment  4C-1-05 Mental Health Program  4C-1-01 Medical Services  4C-1-06 Suicide Precaution and Intervention  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation  Booking and Classification Screening Forms  Inmate Adult Personal History  Medical Intake Screenings  Mental Health Consultation Notes  Mental Health Screening Form</p>	<p>Standard 115.82: Access to emergency  medical and mental health services</p>
<p>MCDOC Policies:  4D-1-04 PREA  4C-1-04 Health Screening and Assessment  4C-1-05 Mental Health Program  4C-1-01 Medical Services  State of New Hampshire Office of the Attorney  General Sexual Assault: An Acute Care  Protocol for Medical/Forensic Evaluation</p>	<p>Standard 115.83: Ongoing medical and mental  health care for sexual abuse victims and  abusers</p>
<p>MCDOC Policies:  4D-1-04 PREA  2019 PREA Incidents  Incident Review Forms  Classification Meeting Minutes</p>	<p>Standard 115.86: Sexual abuse incident  reviews</p>
<p>MCDOC Policies:  4D-1-04 PREA  2019 PREA Incidents  Survey of Sexual Victimization Form</p>	<p>Standard 115.87: Data collection</p>
<p>MCDOC Policies:  4D-1-04 PREA  2019 PREA Incidents  Survey of Sexual Victimization Form</p>	<p>Standard 115.88: Data review for corrective  action</p>
<p>MCDOC Policies:  4D-1-04 PREA  2019 PREA Incidents  Survey of Sexual Victimization Form</p>	<p>Standard 115.89: Data storage, publication,  and destruction</p>
<p>MCDOC Policies:  4D-1-04 PREA  Prior Audit Reports</p>	<p>Standard 115.401: Frequency and scope of  audits</p>
<p>MCDOC Policies:  4D-1-04 PREA  Prior Audit Reports  Agencies Website</p>	<p>Standard 115.403: Audit contents and findings</p>

At the conclusion of the Onsite Audit an exit conference was held with the administration. At this time, I provided an overview of the audit findings during the onsite audit portion.

During the staff interviews I found that the staff took ownership not only of the immediate areas they worked in, but the facility overall. This staff attitude helps in creating the respectful culture at the facility. This was further confirmed by the interviewed inmates who related that they are treated with respect by the staff.

**Post Audit:**

Upon completion of the Pre-Audit and Onsite Audit phases I conducted a systematic evidence review of all of the information obtained during the audit process. I utilized the Compliance Tool as a guide to ensure that all aspects of each standard were met. This assurance was made by a triangulation of the policies and documentation reviewed, my personal observations during the onsite audit, and through the information received during the interviews. After taking all of these factors into account I found that the facility has met all of the standards and are in compliance with the Prison Rape Elimination Act National Standards for Prisons and Jails.

## Facility Characteristics

The Merrimack County Department of Corrections is located at 314 DW Highway Boscawen NH 03303. The facility is located in a rural area of Boscawen NH.

The Goals & Philosophy of the facility are:

The Merrimack County Department of Corrections serves the community and its criminal justice system by providing security, supervision, and assistance to persons remanded to our custody. Our policy is to meet or exceed the standards set by the American Correctional Association, the National Commission of Correctional Healthcare, the New Hampshire Association of Counties, and the Merrimack County Board of Commissioners.

The Department of Corrections uses the protocols of the "Direct Supervision" concept of detention. It operates under a positive-behavior management system designed to be simple, effective, encourage personal development, and reduce recidivism. Each inmate's behavior dictates his or her classification level during their incarceration. Positive behavior and compliance with the rules and regulations is rewarded with incentives and privileges, such as educational programs, visitation, television, recreation, and telephone calls. Conversely, failure to comply with the rules and regulations results in a loss of privileges and incentives.

The main entrance to the facility is controlled by a correctional officer. All visitors to the facility need to pass through a metal detector before entrance is allowed. This process will allow access to the main lobby, further entrance into the building is controlled by main control.

The intake area of the facility has cells that are utilized for securing inmates during the initial intake process. These cells have frosted glass blocking the view of the toilets, allowing privacy while performing bodily functions. At the time of the audit the inmates were kept in this area prior to being moved to a quarantine block where they are housed for 14 days. The normal process is to have the inmates held separate for 3 days, but due to the pandemic this has changed.

The facility has a total of nine housing units, four single cell housing units, two multi occupancy housing units and three open bay style housing units. The facility also has 4 medical cells in the medical area. The celled housing units are constructed in a manner, which provides privacy to the inmates while performing bodily functions, showering and changing clothes. The toilets are offset from the window in the cell door, and all of the showers have curtains on them. In the open bay style housing units the toilets and showers have curtains to provide privacy. Correctional Officers are posted within the housing areas to provide direct supervision over the inmates.

All areas accessible to inmates outside of the housing units have correctional staff assigned to them. No inmates are unsupervised. The toilets for the inmates in these areas have doors for privacy.

The Agency also operates the Edna McKenna Community Corrections Center which is connected to the main jail. During normal operation the facility would house outside workers. At the time of the audit this area was not being utilized no inmates are being allowed outside of the facility. The housing units have curtains and doors for the toilets and showers to provide privacy while toileting and showering. During normal operations this portion of the facility is self-contained, and housed both female and male inmates on separate floors.

Cameras are located throughout the facility, with the main monitors in the security control. During my tour of the facility I found that information on the Prison Rape Elimination Act, and reporting avenues are located throughout the facility, all of this information is also available to the inmates through the kiosk system on the housing units. .

I found that administrative staff, as well as general staff moves throughout the facility frequently, this movement of staff deters any violation of the PREA policy, and more importantly provides an overall safe environment for both inmates and staff.



## Summary of Audit Findings

*The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.*

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

### Standards Exceeded

**Number of Standards Exceeded:** 10

**List of Standards Exceeded:**

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator  
Standard 115.31: Employee training  
Standard 115.32: Volunteer and contractor training  
Standard 115.33: Inmate education  
Standard 115.34: Specialized training: Investigations  
Standard 115.35: Specialized training: Medical and mental health care  
Standard 115.41: Screening for risk of victimization and abusiveness  
Standard 115.42: Use of screening information  
Standard 115.51: Inmate reporting  
Standard 115.71: Criminal and administrative agency investigations

### Standards Met

**Number of Standards Met:** 35

Standard 115.12: Contracting with other entities for the confinement of inmates  
Standard 115.13: Supervision and monitoring  
Standard 115.14: Youthful inmates  
Standard 115.15: Limits to cross-gender viewing and searches  
Standard 115.16: Inmates with disabilities and inmates who are limited English proficient  
Standard 115.17: Hiring and promotion decisions  
Standard 115.18: Upgrades to facilities and technologies  
Standard 115.21: Evidence protocol and forensic medical examinations  
Standard 115.22: Policies to ensure referrals of allegations for investigations  
Standard 115.43: Protective Custody  
Standard 115.52: Exhaustion of administrative remedies  
Standard 115.53: Inmate access to outside confidential support services  
Standard 115.54: Third-party reporting  
Standard 115.61: Staff and agency reporting duties  
Standard 115.62: Agency protection duties  
Standard 115.63: Reporting to other confinement facilities  
Standard 115.64: Staff first responder duties  
Standard 115.65: Coordinated response  
Standard 115.66: Preservation of ability to protect inmates from contact with abusers  
Standard 115.67: Agency protection against retaliation  
Standard 115.68: Post-allegation protective custody  
Standard 115.72: Evidentiary standard for administrative investigations  
Standard 115.73: Reporting to inmates  
Standard 115.76: Disciplinary sanctions for staff  
Standard 115.77: Corrective action for contractors and volunteers  
Standard 115.78: Disciplinary sanctions for inmates  
Standard 115.81: Medical and mental health screenings; history of sexual abuse

Standard 115.82: Access to emergency medical and mental health services  
Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers  
Standard 115.86: Sexual abuse incident reviews  
Standard 115.87: Data collection  
Standard 115.88: Data review for corrective action  
Standard 115.89: Data storage, publication, and destruction  
Standard 115.401: Frequency and scope of audits  
Standard 115.403: Audit contents and findings

## **Standards Not Met**

**Number of Standards Not Met:**

**List of Standards Not Met:**

## PREVENTION PLANNING

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

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

#### 115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  Yes  No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?  Yes  No

#### 115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator?  Yes  No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy?  Yes  No
- 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  No

#### 115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)  Yes  No  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.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The Merrimack County Department of Corrections Policy Number: 4D-1-04 Policy Title: Sexual Assault Prison Rape Elimination Act outlines the agency's mandated zero tolerance toward all forms of sexual abuse and sexual harassment and further outlines the agency's approach to preventing, detecting, and responding to such conduct. This policy furthermore defines all sexual abuse and sexual harassment.

I reviewed the policy in its entirety, as well as questioned staff members on its content and applicable sections to their specific duties within the facility. The staff understood the policy and its practical application to the daily operation of the facility.

The agency has designated a PREA Coordinator. During the interview he related that he has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. I found the Agency PREA Coordinator to be well versed in the PREA Standards, and their daily application. Interviewed staff stated that the PREA Coordinator is always available to answer questions and provide advice on the implementation of the PREA policies. During the onsite portion of the audit I found the PREA Coordinator as well as all other staff dedicated to the prevention of sexual abuse and sexual harassment in the facility. The prevention of incidents of this nature is evident by the minimal amount of PREA allegations at the facility.

Prior to the onsite audit all documentation was reviewed, during the onsite portion I observed the policies in daily practice, and this was further confirmed during my interviews with both staff and inmates.

After a careful review of all documentation, and the information received during interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in their facility.

## **Standard 115.12: Contracting with other entities for the confinement of inmates**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.12 (a)**

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

#### **115.12 (b)**

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  Yes  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency does not contract with any other facility for housing of inmates.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.13: Supervision and monitoring

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.13 (a)

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  No

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No

- 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  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  Yes  No  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  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?  Yes  No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?  Yes  No

#### 115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)  Yes  No  NA

#### 115.13 (c)

- 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  No
- 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  No
- 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  No

#### 115.13 (d)

- 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  No
- Is this policy and practice implemented for night shifts as well as day shifts?  Yes  No
- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has developed a facility staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities have taken into consideration all areas enumerated under this standard. Compliance was determined by reviewing the aforementioned policies. I further questioned staff on the policies and the ability to fully staff the facility at all times. I was informed that the facility will fill posts with overtime if needed to be at full compliment. The facility also has the ability to collapse posts and limit inmate activity and movement when needed.

The staffing at the facility is reviewed yearly by the administration. This was confirmed through interviews and reviewing the staffing analysis for 2019. I also reviewed documentation of staffing analysis from previous years to ensure the yearly review is consistent.

During the interviews with the administration at the facility I confirmed a daily review of the staffing at the facility. The administration meets on a regular basis, this includes all department heads. During this meeting the overall facility operations are discussed to include staffing.

The staffing plan has not been deviated from within the last 12 months. I confirmed during staff interviews that any posts would be filled with overtime if needed, and they have the ability to collapse other posts if need be.

The administration meets on a regular basis to review incidents that have occurred at the facility, as well as discussing normal facility operation. During these meetings, they discuss any adjustments that may need to be made to the staffing plan, deployment of video monitoring and other technologies, and any resources available. This was confirmed during the staff interviews.

The agency has 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. These unannounced rounds take place during all shifts at the facility. The agency has a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring. I further confirmed the rounds are occurring during the staff and inmate interviews as well as reviewing the logs generated by the housing unit officers.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.14: Youthful inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  NA

#### 115.14 (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].)  Yes  No  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].)  Yes  No  NA

#### 115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].)  Yes  No  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].)  Yes  No  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].)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

This facility does not house youthful offenders.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.



## Standard 115.15: Limits to cross-gender viewing and searches

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.15 (a)

- 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  No

#### 115.15 (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  No  NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)  Yes  No  NA

#### 115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  Yes  No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.)  Yes  No  NA

#### 115.15 (d)

- 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  No
- 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  No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?  Yes  No

#### 115.15 (e)

- 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  No

- 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  No

### 115.15 (f)

- 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  No
- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The facility does not conduct cross-gender strip searches or cross-gender visual body cavity searches unless in exigent circumstances or when performed by a medical practitioner. I confirmed this procedure during staff and inmate interviews, as well as review of policy. I also confirmed that the facility has not conducted a search under these circumstances.

The facility does not limit female movement if female staff is unavailable to search them.

The above policies outline procedures and practices that enable 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. The policies further dictate that staff of the opposite gender announces their presence when entering an inmate housing unit. These practices were confirmed during the staff and inmate interviews as well as during the facility tour when I observed the announcements taking place. The bathrooms in the housing units are constructed to provide privacy while performing bodily functions and showering. They have either curtains or doors to provide this privacy.

The facility does not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, it is determined 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. I further confirmed the practices during the staff and medical interviews.

The agency has trained security staff in how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive

manner possible, consistent with security needs. This was confirmed during staff interviews and reviewing the provided training materials.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## **Standard 115.16: Inmates with disabilities and inmates who are limited English proficient**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.16 (a)**

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  Yes  No
- 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  No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities?  Yes  No
- 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  No
- 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  No

#### 115.16 (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  No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  Yes  No

#### 115.16 (c)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency has taken appropriate steps to ensure that inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. These steps include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the agency shall ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. The facility outlines the response to inmates in these categories in the above listed policies. The policies outline

procedures for inmates who are not only non-English speaking, but all who are enumerated in this standard. I confirmed the use of during the staff and inmate interviews.

The agency has taken 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. The agency would utilize Language Bank for interpretation purposes.

The agency does not rely on inmate interpreters, inmate readers, or other types of inmate assistants. The interviewed agency investigator is aware of the approved interpreters and confirmed during their interview that they would utilize these services.

During the inmate interviews I interviewed inmates with Cognitive Disabilities and one inmate hard of hearing. All of these inmates related that the staff further explained the sexual abuse and sexual harassment policies, and ensured that the inmates understood the reporting avenues.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.17: Hiring and promotion decisions

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.17 (a)

- 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  No
- 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  No
- 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 question immediately above?  Yes  No
- 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  No
- 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  No
- 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 question immediately above?  Yes  No

#### 115.17 (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  No
- 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  No

#### 115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check?  Yes  No
- 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  No

#### 115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?  Yes  No

#### 115.17 (e)

- 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  No

#### 115.17 (f)

- 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  No
- 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  No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?  Yes  No

#### 115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  Yes  No

## 115.17 (h)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policies and procedures in place that identify anyone who had been convicted of sexual abuse in a confinement setting, engaged in or attempted to engage in sexual activity in the community or has been civilly or administratively adjudicated for the same. The agency has developed the Disclosure of PREA Hiring and Promotions Checklist Form. This form specifically asks the applicant about these activities. During the interviews with staff, and Human Resources I verified that the form is being utilized, I further verified the utilization by reviewing files, I found that the questions were asked and answered in all of the reviewed files. During the staff interviews I verified they were asked these questions.

During the documentation review, and review of files I found that this process is also being utilized in the promotion system throughout the agency. This was further confirmed through agency level interviews, and interviews of promoted personnel.

The agency has also implemented a background investigation process for all new employees, contractors and volunteers. The background investigations are being conducted as per agency policy. A check through the National Crime Information Center (NCIC) is part of the process. The agency is also conducting these checks on all staff, contractors, and volunteers every 5 years. This was confirmed through interviews and reviewing documentation of the NCIC checks.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.



## Standard 115.18: Upgrades to facilities and technologies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes  No  NA

#### 115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)  
 Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The agency has made no substantial expansion to this facility nor is any planned. During the interviews I confirmed that if any expansion or acquisition of facilities takes place, the overall security and safety is taken into consideration, including the sexual safety of the inmates.

During interviews I confirmed sexual safety and overall facility safety was taken into consideration during the construction of the Edna McKenna Community Corrections Center.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.



# RESPONSIVE PLANNING

## Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.21 (a)

- 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  No  NA

### 115.21 (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  No  NA
- 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  No  NA

### 115.21 (c)

- 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  No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  Yes  No
- 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  No
- Has the agency documented its efforts to provide SAFEs or SANEs?  Yes  No

### 115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  Yes  No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.)  Yes  No  NA

- Has the agency documented its efforts to secure services from rape crisis centers?  
 Yes  No

#### 115.21 (e)

- 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  No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  Yes  No

#### 115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)  Yes  No  NA

#### 115.21 (g)

- Auditor is not required to audit this provision.

#### 115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency is responsible for both the administrative and criminal investigations of all sexual abuse and sexual harassment incidents. These investigations are initially responded to at the facility level utilizing a team approach, where the administration, medical and mental health will be notified. The investigation is further conducted by the agency investigator. The investigator is sworn law enforcement officer and is highly trained in evidence collection and identification. I interviewed the investigator I found that he follows the evidence protocols outlined in the policy, and is well versed in evidence identification and collection.

The facility would utilize a SANE from Concord Hospital and a Victim Advocate from the Merrimack County Advocacy Center. The facility has a Memorandum of Understanding with the Merrimack County Advocacy Center. I contacted a supervisor and confirmed that they provide the services outlined in the MOU.

I also confirmed that the facility would utilize the services of the Merrimack County Sexual Assault Resource Team for response to any sexual assault. The agency has procedures in place for both custodial and non-custodial sexual assault responses. They have created a flow chart for each type of incident, this flow chart is followed when an incident is reported.

The protocols outlined in the policies are developmentally appropriate for youth, and exceed nationally accepted standards. Although the facility does not house juveniles, if an incident came to light involving a juvenile this information would be forwarded to the appropriate law enforcement agency, and the Merrimack Child Advocacy Center would be utilized.

The aforementioned victim advocates are available to the victim during the forensic medical examination process, the investigatory interviews and they provide emotional support, crisis intervention, information, and referrals.

It should be noted that the facility has not had any incidents within the past 12 months where these services were utilized.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## **Standard 115.22: Policies to ensure referrals of allegations for investigations**

### **All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### **115.22 (a)**

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  Yes  No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?  Yes  No

#### **115.22 (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  No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?  Yes  No
- Does the agency document all such referrals?  Yes  No

### 115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)  Yes  No  NA

### 115.22 (d)

- Auditor is not required to audit this provision.

### 115.22 (e)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. This was confirmed through review of policies which outline the procedures for investigating sexual abuse and sexual harassment. I further verified all allegations are investigated during the investigator interview, staff interviews, and review of the agency investigative reports.

The agency investigates all allegations. I verified that the investigative procedure is published on the agency's website.

The agency has policies in place that govern the investigative process. This was confirmed during policy review and investigator interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No
- 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  No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  Yes  No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?  Yes  No
- 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  No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  Yes  No
- 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  No
- 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  No

#### 115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility?  Yes  No
- 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  No

### 115.31 (c)

- Have all current employees who may have contact with inmates received such training?  
 Yes  No
- 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  No
- 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  No

### 115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency provides yearly training to all employees on the areas enumerated in this standard. I reviewed the training curriculum and materials, I found that they address all areas. I further confirmed the training during the staff interviews and the review of training records. The employees receive the initial training and annual updates. It was confirmed during staff interviews that they also receive updates during roll calls.

All employees receive training on interacting with males, females, intersex, gay and bisexual and transgender inmates. This was confirmed during review of training materials and during staff interviews.

The employees are verifying the receipt of the training through a signature, this was verified during the review of the sample signature logs.

The training provided by the agency is created yearly by the training department. During the interviews they confirmed they are constantly updating the training to provide the most current information to the staff. They are constantly improving on the training materials.

The agency is providing PREA training on a yearly basis, this far exceeds the provisions of the standard.

After a careful review of all documentation, and the information received during interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in the facility.

## Standard 115.32: Volunteer and contractor training

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.32 (a)

- 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  No

#### 115.32 (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  No

#### 115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has trained all volunteers and contractors who have contact with inmates on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates. At a minimum they are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. No contractors nor volunteers were available during the audit due to the facility lockdown resulting from the Covid 19 pandemic.

The agency maintains all documentation confirming that volunteers and contractors understand the training they have received. This documentation is maintained at the facility, this was confirmed during review of the volunteer and contractor acknowledgment forms.

The agency is far exceeding the expectations of the standard. They are providing yearly training and updates to volunteers and contractors to ensure they are aware of the zero-tolerance policy and PREA.

After a careful review of all documentation, and the information received during the interviews, I found that the agency has substantially exceeded the requirements of this standard, and all provisions. This decision was based on the agency's overall commitment to sexual safety in the facility.

## Standard 115.33: Inmate education

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  Yes  No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?  Yes  No

#### 115.33 (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  No
- 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  No
- 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  No

#### 115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)?  Yes  No
- 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  No

#### 115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?  Yes  No



- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  Yes  No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?  Yes  No

### 115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions?  Yes  No

### 115.33 (f)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

During the intake process inmates receive information explaining the agency's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment, this information is located in the inmate handbook and in a pamphlet form. This was confirmed during the inmate and staff interviews, I further confirmed this by reviewing inmate electronic files and ensuring that the acknowledgment forms were in the files and signed by the inmates. The signatures are captured electronically. During the intake process the inmates will view a video on the Prison Rape Elimination Act and utilize the electronic signature described above to acknowledge viewing the video.

The inmates also receive an in-depth orientation during classification where a second screening takes place. At this time the inmates receive additional information on the agency's zero tolerance policy regarding sexual abuse and sexual harassment. This was confirmed during the staff interviews and the inmate interviews. This orientation takes place within seven days of arriving at the facility.

The facility provides inmate education in formats accessible to all inmates, this includes inmates who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility provides materials to inmates in Spanish, they also have designated staff who can provide interpretation of other languages. The Case Managers confirmed they would provide education to other individuals if needed.

The facility has all key information on the zero-tolerance policy and reporting avenues provided through signage placed throughout the facility. I viewed this signage during the facility tour. I further confirmed that the signage has been in place during the inmate and staff interviews.

During the onsite audit I discussed with the PREA Coordinator the advantages of adding the PREA video to the kiosk system. All inmates are required to access the system, and if the video was added as a prerequisite when initially logging in, this would be an added level of education. The facility is moving towards adding the video to the kiosk.

The agency is providing inmate's education at several different times while at the facility. They are not only receiving the initial education, but an in person education piece which is conducted one-on-one, to ensure the inmate understands the agency's zero tolerance policy regarding sexual abuse and sexual harassment and reporting avenues.

After a careful review of all documentation, and the information received during interviews, I found that the facility substantially exceeds the requirements of this standard, and all provisions.

## Standard 115.34: Specialized training: Investigations

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.34 (a)

- 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  No  NA

#### 115.34 (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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA

#### 115.34 (c)

- 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  No  NA

### 115.34 (d)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency is responsible for both the administrative and criminal investigations of all sexual abuse and sexual harassment incidents. These investigations are conducted by the agency investigator. The investigator is a sworn law enforcement officer and is trained in conducting criminal investigations. The training he has received includes the use of Miranda and Garrity warnings, techniques for interviewing sexual abuse victims, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. This was confirmed during the investigator interview, investigation review, and policy review.

The agency documents all training attended by the investigators. This was confirmed during the interview with the investigator, as well as review of the training records.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

### Standard 115.35: Specialized training: Medical and mental health care

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.35 (a)

- 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  No  NA
- 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  No  NA
- 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  No  NA

- 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    No    NA

### 115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)  
 Yes    No    NA

### 115.35 (c)

- 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    No    NA

### 115.35 (d)

- 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    No    NA
- Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)  Yes    No    NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

All full and part-time medical and mental health care practitioners have been trained on the following:

- How to detect and assess signs of sexual abuse and sexual harassment;
  - How to preserve physical evidence of sexual abuse;
  - How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
  - How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.
- This was confirmed by reviewing the training materials utilized by the facility. I also confirmed this training with the medical and mental health staff during interviews.

The medical staff at the facility does not conduct sexual assault examinations.

The medical and mental health care practitioners also receive the training mandated for employees under § 115.31 or for contractors and volunteers under § 115.32, depending upon the practitioner's status at the agency. This was confirmed during the review of training rosters at the facility. I also confirmed this training with the medical and mental health staff during interviews.

The facility is providing this training on a yearly basis to all medical and mental health care practitioners. This practice far exceeds the requirement of the standard. They have also created a Medical PREA binder with all training materials, policy, and a flow chart to utilize during incidents. This is utilized by staff as a refresher and also as a quick reference during an incident.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

# SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

## Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.41 (a)

- 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  No
- 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  No

### 115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?  
 Yes  No

### 115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?  
 Yes  No

### 115.41 (d)

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No

- 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  No
- 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  No
- 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  No
- 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  No

#### 115.41 (e)

- 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  No
- 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  No
- 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  No

#### 115.41 (f)

- 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  No

#### 115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to a request?  Yes  No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  Yes  No
- 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  No

#### 115.41 (h)

- 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  No

#### 115.41 (i)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

All inmates are assessed during the intake process, which is completed upon arrival at the facility. This screening is conducted utilizing the screening form in the X Jail system. This instrument identifies all areas of victimization and abusiveness enumerated in this standard. This was verified through interviews with staff and inmates, as well as review of the completed instruments. The screening is being conducted by trained staff.

The inmates are also screened during the medical intake which takes place upon arrival at the facility. During the medical intake they ask about prior victimization, they have the ability to task a mental health follow up for the inmate.

The initial screening for risk of being sexually abusive considers any known prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. This was confirmed during review of the screening tool and interviews with both staff and inmates.

The facility is reassessing all inmates within 30 days of arrival, this reassessment is being conducted by the case managers, and they are taking into considerations all information available to them at the time of reassessment. This was confirmed by reviewing the reassessment documentation and staff interviews.

The facility would reassess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that may change the inmate's risk of sexual victimization or abusiveness. This was confirmed during the staff interviews.

Inmates are informed during the screening process that they will not be disciplined for refusing to answer, or for not disclosing complete information. This was confirmed during review of the screening tools, and during the staff and inmate interviews.

The agency implements control on the dissemination of screening information at the facility level. The information from the screening tools is only available to case managers, medical if needed, and administration. The screening information is stored in the inmate's electronic file.



The agency further screens all inmate through medical, where they again ask questions relative to sexual victimization, this was confirmed by reviewing the medical screening forms and interviews. The inmates are constantly being reassessed by their assigned Case Managers. The Case Managers meet with each inmate on their case load once a month, and make case notes in the Offender Management System. This was confirmed through interviews and watching the interaction between inmates and the Case Managers.

The interviewed Case Managers stated that they meet with the new arrival inmates within 72 hours. During this meeting they review all intake documentation with the inmates. They all related that they feel the inmates may be more comfortable offering sensitive information to them since they are not in uniform. This practice shows the commitment of the Case Managers to the overall safety at the facility.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

## Standard 115.42: Use of screening information

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.42 (a)

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No

#### 115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate?  Yes  No

#### 115.42 (c)

- 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  No
- 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  No

#### 115.42 (d)

- 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  No

#### 115.42 (e)

- 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  No

#### 115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  Yes  No

#### 115.42 (g)

- 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  No  NA
- 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  No  NA

- 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  
 No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency utilizes the information from the screening and reassessment 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. This was confirmed during review of the policy and I confirmed these procedures during staff and inmate interviews.

The agency makes all of these determinations on an individualized basis, this ensures the safety of each inmate. This was confirmed during policy review, and staff and inmate interviews.

I confirmed during policy review and interviews that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the agency considers 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. I also confirmed that the inmates own views would be taken into consideration during these decisions. Through policy and interviews I confirmed that a transgender inmate would be given the opportunity to shower separately from other inmates.

I confirmed during interviews with the Case Managers that placement and programming assignments for each transgender or intersex inmate would be reassessed at least twice each year. This is also addressed in policy.

Neither the agency nor facility place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status. This was confirmed during interviews, as well as inmate interviews, several inmates interviewed at the facility identified as gay, and bisexual.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

## Standard 115.43: Protective Custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.43 (a)

- 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  No
- 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  No

#### 115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?  Yes  No
- 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  No
- 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  No
- 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  No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.)  Yes  No  NA

#### 115.43 (c)

- 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  No
- Does such an assignment not ordinarily exceed a period of 30 days?  Yes  No

#### 115.43 (d)

- 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  No
- 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  No

#### 115.43 (e)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made. This policy addresses all provisions in the standard, the language in the policy meets all aspects of the standard.

This facility has had no incident where they have segregated an inmate due to being at high risk of sexual victimization. The facility is a minimum-security facility and does not have a segregated housing unit, nor do they have the ability to segregate inmates in this manner.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

# REPORTING

## Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment?  Yes  No
- 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  No
- 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  No

### 115.51 (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  No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  Yes  No
- Does that private entity or office allow the inmate to remain anonymous upon request?  Yes  No
- 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)  Yes  No  NA

### 115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?  Yes  No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  Yes  No

### 115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The facility provides the inmates the information on reporting in the inmate handbook and pamphlet provided at intake and through signage throughout the facility. The inmates can report directly to any staff, through medical, or through the PREA reporting hotline. During the interviews with both staff and inmates I confirmed that they were aware of the reporting avenues.

The agency provides a hotline through the Crisis center of Central New Hampshire for reporting. This is provided in the inmate pamphlets and through signage throughout the facility. The inmates interviewed related that they understood they could remain anonymous.

The staff interviews related that they understood the agency policy that states that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

The agency provides in policy a method for staff to privately report sexual abuse and sexual harassment of inmates. The policy allows the staff to go outside their immediate chain of command.

As previously stated the inmates also have access to the Kiosk system to make any notification.

The agencies website further instructs third parties on how to report. This was confirmed by viewing the agencies website.

I found during the inmate interviews that the inmates who were interviewed felt that if something was happening, they would feel comfortable telling a staff member at the facility. This confidence in utilizing this reporting avenue shows the overall culture at the facility. Although this statement may not be true for all inmates, the agency has provided so many different reporting avenues that an inmate should feel comfortable with one of them.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

## Standard 115.52: Exhaustion of administrative remedies

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.  Yes  No

#### 115.52 (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  No  NA
- 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  No  NA

#### 115.52 (c)

- 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  No  NA
- 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  No  NA

#### 115.52 (d)

- 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  No  NA
- 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  No  NA
- 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  No  NA



### 115.52 (e)

- 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  No  NA
- 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  No  NA
- 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  No  NA

### 115.52 (f)

- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA
- 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  No  NA

### 115.52 (g)

- 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  No  NA

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The audited facility is exempt from this standard, it does not have administrative procedures to address inmate grievances regarding sexual abuse.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.53: Inmate access to outside confidential support services

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.53 (a)

- 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  No
- 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.)  Yes  No  NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  Yes  No

#### 115.53 (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  No

#### 115.53 (c)

- 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  No

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  Yes  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

Access to outside confidential support services is outlined in the agencies policies and procedures. The inmate would have the ability to utilize the services provided through the Crisis center of Central New Hampshire and the Merrimack County Victim Advocacy Center. These services are outlined in the inmate handbook, and would be provided to inmates involved in an incident. The services that the inmates would receive are the same as the level received in the community, this was confirmed with the supervisor at the Merrimack County Victim Advocacy Center.

Through interviews I further established that follow up mental health care would be provided by the facility for any inmate victim or abuser who was involved in an incident.

The PREA Coordinator would 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. This was confirmed during interviews.

The facility has provided the contact information for the Crisis center of Central New Hampshire and the Merrimack County Victim Advocacy Center to inmates involved in incidents, it is unknown if they contacted the agency due to confidentiality. This was confirmed through interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.54: Third-party reporting

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?  Yes  No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency has established third party reporting methods in policy, these methods allow inmates to report for other inmates and outside individuals to report. The agencies website outlines the third party reporting avenues, this was confirmed through review of the agency website. The website has the following posted:

If an inmate you know has been sexually assaulted, subjected to sexual harassment, threatened for sex, promised favors or protection in exchange for sex, please let someone know. To report an incident, you may use any of the following options:

- Contact MCDOC at 603-796-3600.
- Contact the Merrimack County Sheriff's Office at 603-796- 6600.
- Write or Call the local Crisis Center – Crisis Center of Central New Hampshire at:

P.O. Box 1344, Concord, NH 03302 / 24 hour Crisis Line 1-866-841-6229.

The facility has third party reporting avenues posted in areas in the facility where they can be viewed by visitors.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

# OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

## Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.61 (a)

- 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  No
- 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  No
- 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  No

### 115.61 (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  No

### 115.61 (c)

- 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  No
- 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  No

### 115.61 (d)

- 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  No

### 115.61 (e)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency policy states that an employee receiving a complaint of or otherwise has knowledge of alleged sexual misconduct shall immediately report the complaint to a supervisor, manager, shift commander, or head of the unit followed by the appropriate written format used to document misconduct. The staff interviewed understood their responsibilities under this policy. During interviews with staff who reported an allegation I verified that they followed the policy.

The policy further states that information concerning a complaint of alleged sexual misconduct is confidential and may only be available to individuals who have an established role in the reporting, processing, investigating, and resolving the alleged sexual misconduct and immediate and continued care of the victim. All staff interviewed understood this requirement.

During the interviews of medical and mental health staff I confirmed their duty to report, they understood their obligations to report an incident to security staff. They utilize a limits of confidentiality form that is signed by the inmate.

All allegations are being reported to the investigation division. This was confirmed during staff interviews and review of the investigations.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.62 (a)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agencies policies dictate that when staff learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The staff interviewed understood their responsibility and all responded that they would immediately take appropriate steps to protect the inmate.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.63 (a)

- 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  No

### 115.63 (b)

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

### 115.63 (c)

- Does the agency document that it has provided such notification?  Yes  No

### 115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?  Yes  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

Through policy the agency has established procedures and practices that meet all of the requirements of the standard and provision. These include notification by the facility head to the head of the facility where the allegation allegedly took place within 72 hours, as well as documentation of the information received and notification. The policy further states that if an allegation is received in such a manner the facility needs to notify the PREA Coordinator and Investigator. I confirmed these policies and practices through documentation review of forwarded investigations at other facilities, as well as through staff interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

### Standard 115.64: Staff first responder duties

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.64 (a)

- 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  No
- 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  No
- 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  No
- 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  No



### 115.64 (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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency policies outline the initial response by staff. These policies include all of the provisions of the standard. The staff interviewed understood their responsibilities if they were the first responder to an allegation.

I verified compliance during the interview process, as well policy and investigation review.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

### Standard 115.65: Coordinated response

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.65 (a)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The facility has adopted the Merrimack County Department of Corrections Policy number: 4D-1-04 as the overall institutional plan to respond to sexual abuse incidents. This plan dictates the actions and coordination between first responders, supervisors, administration, medical, mental health and investigator. I confirmed the institutional plan through review of the plan, as well as during staff interviews. The facility has not had any investigations related to sexual abuse, but has had investigations of sexual harassment.

After a careful review of all documentation and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.66: Preservation of ability to protect inmates from contact with abusers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?  Yes  No

#### 115.66 (b)

- Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

I reviewed SEA of NH, Inc., SEIU Local 1984 Contract. 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 of a determination of whether and to what extent discipline is warranted. This was further confirmed during the interview with the Union Steward.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.67: Agency protection against retaliation

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.67 (a)

- 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  No
- Has the agency designated which staff members or departments are charged with monitoring retaliation?  Yes  No

#### 115.67 (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  No

#### 115.67 (c)

- 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  No

- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- 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  No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  Yes  No

#### 115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?  
 Yes  No

#### 115.67 (e)

- 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  No

#### 115.67 (f)

- Auditor is not required to audit this provision.

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has established a policy that meets the provisions of this standard. The agency has identified the PREA Coordinator to monitor the inmate or staff member for alleged retaliation.

The agency has established through past incidents that they utilize housing transfers, as well as facility transfers of perpetrators to protect the victim in an incident. This was confirmed during review of investigations and through staff interviews.

I reviewed completed monitoring documentation that show the monitoring of the inmates. All staff interviewed understood their obligation under the policy.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.68: Post-allegation protective custody

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.68 (a)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The facility has established a policy that states any inmate who is alleged to have suffered sexual abuse is subject to the requirements of standard 115.43. This was confirmed through review of the policy. The audited facility did not have any inmates who suffered sexual abuse who were put into segregated housing.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

# INVESTIGATIONS

## Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.71 (a)

- 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  No  NA
- 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  No  NA

### 115.71 (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  No

### 115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?  Yes  No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?  Yes  No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  Yes  No

### 115.71 (d)

- 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  No

### 115.71 (e)

- 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  No
- 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  No

### 115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?  Yes  No

- 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  No

#### 115.71 (g)

- 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  No

#### 115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?  Yes  No

#### 115.71 (i)

- 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  No

#### 115.71 (j)

- 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  No

#### 115.71 (k)

- Auditor is not required to audit this provision.

#### 115.71 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)  Yes  No  NA

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

During the policy review I established that the agency has policies in place that address all provisions of this standard. More importantly during the review of agency investigations, and staff interviews I found they understand the provisions of the standard and are applying them throughout their investigations.



The Investigator has received training on how to conduct the investigations at the facility level. He works closely with the administration during any investigation. He is a highly trained sworn law enforcement officers who conducts both in depth administrative investigations as well as all criminal investigations. After reviewing investigations, I was impressed with the consistency of the overall investigation process.

During interviews and the review of the investigation reports I found that all substantiated allegations that violated criminal law were sent for a prosecutorial decision.

After a careful review of all documentation, and the information received during interviews, I found that the agency substantially exceeds the requirements of this standard, and all provisions.

## Standard 115.72: Evidentiary standard for administrative investigations

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.72 (a)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency has policies that states there shall not be any standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. During the agency investigation review and investigator interview I verified that they are applying preponderance of evidence to make a determination.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard and all provisions.

## Standard 115.73: Reporting to inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.73 (a)

- 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  No

#### 115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)  Yes  No  NA

#### 115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Yes  No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Yes  No

#### 115.73 (d)

- 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  No
- 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  No

### 115.73 (e)

- Does the agency document all such notifications or attempted notifications?  Yes  No

### 115.73 (f)

- Auditor is not required to audit this provision.

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policies in place that address all provisions of this standard. The agency utilizes a Notification of Investigation Findings Status form to notify the inmate of the status of the investigation. I confirmed this through policy review, staff interviews, inmate interviews, and review of notification forms.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

# DISCIPLINE

## Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  Yes  No

### 115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  Yes  No

### 115.76 (c)

- 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  No

### 115.76 (d)

- 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  No
- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policy in place that address staff discipline for a violation of any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs staff conduct. I confirmed the utilization of the discipline through review of the agency investigations, and staff interviews.

The audited facility has disciplined one staff member within the last 12 months for a violation of these policies. This investigation was also forwarded for a prosecutorial decision.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.77: Corrective action for contractors and volunteers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  Yes  No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  Yes  No

#### 115.77 (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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policy in place that addresses corrective action for volunteers and contractors who violate of any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs conduct. I confirmed the utilization of the discipline through review of the agency investigations and staff interviews.

The audited facility has not disciplined any volunteers and contractors within the last 12 months for a violation of these policies.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.78: Disciplinary sanctions for inmates

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.78 (a)

- 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  No

#### 115.78 (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  No

#### 115.78 (c)

- 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  No

#### 115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?  Yes  No

#### 115.78 (e)

- 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  No

#### 115.78 (f)

- 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  No

#### 115.78 (g)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policy in place that addresses discipline for inmates who violate any provision of their Prison Rape Elimination Act policy, as well as any other policy that governs inmate conduct. I confirmed the utilization of the discipline through review of the agency investigations and staff interviews.

The audited facility has disciplined inmates within the last 12 months for a violation of these policies. The discipline was commensurate with the nature and circumstances of the incident.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## MEDICAL AND MENTAL CARE

### Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  
 Yes  No  NA

#### 115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)  Yes  No  NA

#### 115.81 (c)

- 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?  Yes  No

#### 115.81 (d)

- 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  No

#### 115.81 (e)

- 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  No



## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policies in place that address the provisions of this standard. As previously stated under standard 115.41 the medical department does a second screening of the inmates and asks questions relative to sexual victimization as well as sexual abusiveness. If it is found that any inmate has experienced either they will be scheduled for an evaluation with a mental health practitioner within 14 days. I confirmed these evaluations with the medical and mental health personnel as well as during the inmate interviews.

All medical records are kept secure and are only available to medical and mental health personnel.

I confirmed compliance with the standard through the review of inmate medical files, staff interviews and inmate interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.82: Access to emergency medical and mental health services

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.82 (a)

- 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  No

#### 115.82 (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  No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  Yes  No

#### 115.82 (c)

- 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  No

### 115.82 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLAINE

The medical personnel ensure that victims of sexual assault receive prompt and appropriate medical intervention. The nature and scope are determined by medical and mental health practitioners according to their professional judgment.

The facility has 24 hour medical coverage.

The policy further states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans.

The above services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.83 (a)

- 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  No

#### 115.83 (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  No

**115.83 (c)**

- Does the facility provide such victims with medical and mental health services consistent with the community level of care?  Yes  No

**115.83 (d)**

- 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  No  NA

**115.83 (e)**

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (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  No  NA

**115.83 (f)**

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?  Yes  No

**115.83 (g)**

- 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  No

**115.83 (h)**

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)  Yes  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The medical personnel ensure that victims of sexual assault receive prompt and appropriate medical follow up treatment. The nature and scope are determined by medical and mental health practitioners according to their professional judgment.

The facility has 24 hour medical coverage.

The policy further states that prophylactic treatment and testing is offered to the patient, as well as follow up care for sexually transmitted or other communicable diseases. An evaluation by a mental health provider is completed for crisis intervention counseling and long term follow up plans.

The above services are offered at no financial cost to the inmate. These policies and procedures were confirmed with the medical and mental health staff during interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## DATA COLLECTION AND REVIEW

### Standard 115.86: Sexual abuse incident reviews

#### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

##### 115.86 (a)

- 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  No

##### 115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation?  Yes  No

##### 115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?  Yes  No

##### 115.86 (d)

- 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  No
- 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  No
- 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  No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  Yes  No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  Yes  No
- 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  No

##### 115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  Yes  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has policy in place that outlines the facilities review of incidents. The policy addresses all provisions of the standard. The facility reviews the investigations and documents the outcome of the review. The review is documented by the PREA Coordinator.

I confirmed the incident review process during staff interviews and review of incident review documentation. All interviewed staff understood the process for reviewing incidents and the documentation requirements.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.87: Data collection

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.87 (a)

- 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  No

#### 115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?  Yes  No

#### 115.87 (c)

- 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  No

#### 115.87 (d)

- 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  No

### 115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)  Yes  No  NA

### 115.87 (f)

- 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  No  NA

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has established policies that address all provision of this standard. The agency utilizes the Survey of Sexual Violence data collection instrument to collect all sexual abuse data.

The data is also collected from all contracted facilities.

Compliance was confirmed through review of completed data collection instruments and staff interviews.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.88: Data review for corrective action

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.88 (a)

- 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  No
- 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  No

- 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  No

#### 115.88 (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  No

#### 115.88 (c)

- 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  No

#### 115.88 (d)

- 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  No

#### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

#### EVIDENCE OF COMPLIANCE:

The agency has policies in place that address all provisions of the standard.

The PREA Coordinator reviews all 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;
- Taking corrective action on an ongoing basis; and
- Preparing an annual report of its findings and corrective actions for each facility, and the agency

The report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

The agency's report is approved by the agency head and made readily available to the public through the agency website.

The agency has redacted any material from the reports that would present a clear and specific threat to the safety and security of its facilities.



During staff interviews I confirmed that if a trend was identified while reviewing the data a corrective action plan would be developed for that facility and immediately be put into place.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.89: Data storage, publication, and destruction

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  
 Yes  No

#### 115.89 (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  No

#### 115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  Yes  No

#### 115.89 (d)

- 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  No

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has a policy in place that addresses the provisions of this standard. I found that the agency digitally securely retains all data collected, this data is available to the public through the website.

The annual reports are published on the website. All personal identifiers have been removed from the reports.

The agency has a policy in place that maintains all sexual abuse data for at least 10 years from the date received.

Staff interviews and review of the annual reports further confirmed this procedure.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

# AUDITING AND CORRECTIVE ACTION

## Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.401 (a)

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

### 115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*)  Yes  No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.)  Yes  No  NA
- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.)  Yes  No  NA

### 115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?  Yes  No

### 115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?  Yes  No

### 115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  Yes  No

### 115.401 (n)

- 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  No

## Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The facility was audited once during the auditing cycle from August 20, 2016, and August 20, 2019. This audit report is uploaded to the agency website.

During the audit process I was able to receive copies of all relevant documentation, conduct private interviews with staff and inmates, tour the complete facility, and receive confidential correspondence from both inmates and staff.

After a careful review of all documentation, and the information received during both the agency level and the facility level interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## Standard 115.403: Audit contents and findings

### All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.403 (f)

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

### Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

### EVIDENCE OF COMPLIANCE:

The agency has published all final audit reports on their website, this was confirmed by navigating to the page on the website and reviewing all of the audit reports.

After a careful review of all documentation, and the information received during interviews, I found that the agency is substantially compliant with the requirements of this standard, and all provisions.

## AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Patrick J. Zirpoli

July 24, 2020

**Auditor Signature**

**Date**