

PREA Facility Audit Report: Final

Name of Facility: Bannock County Detention Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/05/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Christina Kampczyk	Date of Signature: 11/05/ 2023

AUDITOR INFORMATION	
Auditor name:	Kampczyk, Christina
Email:	[REDACTED]
Start Date of On-Site Audit:	09/19/2023
End Date of On-Site Audit:	09/21/2023

FACILITY INFORMATION	
Facility name:	Bannock County Detention Center
Facility physical address:	5800 South 5th Avenue, Pocatello, Idaho - 83204
Facility mailing address:	

Primary Contact	
Name:	Captain Lyle Thurgood
Email Address:	[REDACTED]
Telephone Number:	[REDACTED]

Warden/Jail Administrator/Sheriff/Director	
Name:	Captain Lyle Thurgood
Email Address:	[REDACTED]
Telephone Number:	[REDACTED]

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

Facility Health Service Administrator On-site	
Name:	Dr. Sherry Stoutin
Email Address:	[REDACTED]
Telephone Number:	208-236-7139

Facility Characteristics	
Designed facility capacity:	330
Current population of facility:	279
Average daily population for the past 12 months:	262
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Both females and males
Age range of population:	18-67
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	52
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	22
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	58

AGENCY INFORMATION

Name of agency:	Bannock County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	5800 South 5th Avenue, Pocatello, Idaho - 83204
Mailing Address:	
Telephone number:	2082367130

Agency Chief Executive Officer Information:

Name:	Sheriff Tony Manu
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information

Name:		Email Address:	
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

7

- 115.13 - Supervision and monitoring
- 115.18 - Upgrades to facilities and technologies
- 115.22 - Policies to ensure referrals of allegations for investigations
- 115.31 - Employee training
- 115.32 - Volunteer and contractor training
- 115.64 - Staff first responder duties
- 115.65 - Coordinated response

Number of standards met:

38

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2023-09-19
2. End date of the onsite portion of the audit:	2023-09-21

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	330
15. Average daily population for the past 12 months:	262
16. Number of inmate/resident/detainee housing units:	9
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	279
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	3
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	1
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	2

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>7</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>52</p>
<p>50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>58</p>

<p>51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>22</p>
<p>52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>14</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>On the first day of the on-site audit, the Auditor was provided with inmate rosters from each housing unit. Inmates were selected for interviews based on their time at the facility, age, gender, race and ethnicity, length of time in the facility and their housing unit.</p>

56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	There were no barriers in completing interviews. The facility was very responsive in ensuring inmates were escorted to the auditor for private interviews.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	12
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2

<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility leadership confirmed there were no blind or low vision inmates at the facility during the on-site audit. Additionally, during the facility tour, and while onsite at the facility, the Auditor did not observe any blind or low vision inmates.</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility leadership confirmed there were no deaf or hard of hearing inmates at the facility during the on-site audit. Additionally, during the facility tour, and while onsite at the facility, the Auditor did not observe any deaf or hard of hearing inmates.</p>

<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>1</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Facility leadership confirmed there were no transgender or intersex inmates at the facility during the on-site audit. Additionally, during the facility tour, and while onsite at the facility, the Auditor did not observe any transgender or intersex inmates.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>1</p>

<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>7</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility does not use segregated housing for inmates who have alleged to have suffered sexual abuse per policy.</p>

<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor requested and received inmate rosters representing each of the nine (9) housing units on the first day of the on-site visit. Twenty-six (26) inmates were selected based on their time in the facility, age, gender, housing unit assignment, race and ethnicity. Based on this information, twelve (12) targeted interviews were conducted. The Auditor informed the inmates, of confidentiality, that interviews were voluntary, and they were allowed to decline to be interviewed. The Auditor also had informal conversations with inmates during the facility tour and at other times while at the facility. The Auditor interviewed the inmates using both the targeted and random protocols. Overall, the inmates reported feeling sexually safe being housed at the facility, and that they could name several ways in which they could report abuse.</p>
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Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>10</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The facility provided the Auditor with staff rosters and work schedules. Staff were selected randomly for interviews based on their length of time working at the facility, their schedule, rank and work assignment. The Auditor and support staff arrived at the facility early two (2) days in order to conduct interviews with staff who work the graveyard shift. A total of ten (10) random interviews were conducted. The Auditor was also able to have informal conversations with staff during the facility tour and while present for the three (3) day on-site visit. Overall, staff were very knowledgeable about PREA and how they would respond to an incident of abuse as well as the PREA education provided to inmates.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>10</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>

79. Were you able to interview the PREA Compliance Manager?

Yes

No

NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Mental health/counseling <input type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other

<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The facility provided the Auditor with staff rosters and work schedules and specialized staff were selected for interviews from these lists. One mental health staff and two medical staff were interviewed as specialized staff. These staff are contracted through Ivy Medical and thus not included in the total count of Specialized Staff for question #75 of this Post Audit report. A total of thirteen interviews were conducted using the interview protocols for Specialized Staff.</p>
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SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

<p>85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The Auditor had unimpeded access to the entire facility (interior and exterior) during the three-day on-site audit. During the facility tour, the Auditor spoke was able to have informal conversations with inmates and staff to gain an understanding of the facility operations and practices in relation to PREA. The Auditor observed PREA signage and postings throughout the facility which included telephone numbers in which to report abuse. Telephones were located within each housing unit and were functioning during the audit visit. The Auditor spoke with booking and classification staff who conducted a mock intake of an inmate to help clarify the facility's intake process. Medical and mental health staff are contracted through Ivy Medical. Additionally, kitchen staff are contracted workers as well. All contracted staff and volunteers receive PREA training prior to being allowed to be on-site at the facility and around inmates. The Auditor observed abundant security mirrors and camera placement throughout the facility and also observed active surveillance of the video monitors by staff in the control room. During the facility tour, the Auditor also observed the PREA Audit notices posted in each housing unit and at the facility entrance, staff engaged in active supervision of the inmates, privacy for inmates while using showering, changing clothing or using the restroom in each of the nine (9) housing units. There were no blind spots observed in the facility that were not covered by multiple cameras.</p>

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

Yes

No

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

The Auditor reviewed personnel records of twenty-six (26) staff, volunteers, and contractors to include initial criminal record checks, initial and annual PREA training records and five-year criminal records checks if applicable. A total of twenty-six (26) inmate records were reviewed which included initial and comprehensive PREA education, PREA risk screening assessments within seventy-two (72) hours of intake and PREA risk screening reassessments within thirty (30) days of intake. The Auditor also reviewed six (6) investigation files, and supervisory rounds documentation. There were no barriers in receiving or reviewing any requested documentation. The facility was very accommodating in providing any requested information.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	3	0	3	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	3	0	3	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	3	0	3	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	3	0	3	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	3
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	3

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	3
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	3

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

3

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:

1

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.1, Sexual Misconduct, General Provisions • Organizational Chart • Idaho Jail Standards Chapter 12 • Bannock County Website • Zero-Tolerance Posters <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Detention Staff • Inmates

Bannock County Detention Center Policy 10.1 supports the facility's zero-tolerance of sexual abuse and sexual harassment. This written policy mandates zero-tolerance toward all forms of sexual abuse, sexual misconduct and sexual harassment towards all persons working or in the custody of the facility. The policy clearly and comprehensively outlines the agencies approach to preventing, detecting, and responding to such contact. Per the policy, "Any sexual act, sexual contact or sexual offense between an inmate and a staff member, visitor, volunteer, contractor, or other inmate is prohibited. No inmate, either incarcerated or under the supervision of the facility can give consent to any sexual relationship with a staff member. Sexual contact and displays of affection of any kind between two inmates is prohibited by facility rules regardless of consent between the two participants."

The policy outlines how it will achieve "zero-tolerance" through the implementation of:

1. Standardized definitions for prohibited behaviors and activities.
2. Administrative accountability.
3. Preventive personnel practices.
4. Inmate screening, classification, and housing practices.
5. Inmate education and information.
6. Limits on cross-gender viewing.
7. Mandatory incident reporting.
8. Providing medical/mental health professional services.
9. Investigations of all alleged incidents.
10. Imposing disciplinary action on perpetrators.
11. Collection and review of incident data.
12. Routine facility PREA audits

The Idaho Jail Standards, Chapter 12, requires the facility to have written policies and procedures that promote zero-tolerance toward the sexual assault of inmates and promote adherence to the current PREA standards as published in the Federal Register or the IPREA standards agreed upon by the Idaho Sheriffs' Association and the Idaho Department of Correction. Chapter 12 of the Idaho Jail Standards also describes the facility's approach and implementation of the requirements per the PREA standards.

Posters containing the facility's Zero-Tolerance Policy were observed throughout the facility and in each living unit during the audit tour. Interviews with inmates, staff, volunteers, and contractors clearly show that they have been informed and understand the facility's Zero-Tolerance Policy towards sexual abuse and sexual harassment.

The Bannock County's website maintains a webpage specific to PREA Compliance and Investigations. The page reads in part "Rape and sexual activity seriously reduces the mission of the Bannock County Sheriff's Office to prevent crime and provide quality criminal justice service. In accordance with the Prison Rape Elimination Act of 2003, the Bannock County Detention Center has established a zero-tolerance standard

	<p>regarding the incidence of rape and sexual activity. With this policy, the Bannock County Detention Center has established practices that will attempt to abate any incidence of rape or sexual activity within the Detention Center. All allegations of rape or sexual activity will be investigated.”</p> <p>The agency employs an upper-level, agency wide Detention Captain/PREA Coordinator. The Jail Administrator of BCDC is a Captain who is also the Detention Captain/PREA Coordinator as listed in the agencies organizational structure. The Detention Captain reports directly to the Chief of the Bannock County Sheriff’s Department who reports directly to the Bannock County Sheriff. When interviewed, the Detention Captain/PREA Coordinator stated he has sufficient time and authority to develop, implement, and oversee the agency’s efforts to comply with the prior standards in the detention facility. He further stated he has authority and the latitude per the Sheriff to take whatever actions are necessary to work towards compliance of the PREA Standards. The facility does not have a designated PREA Compliance Manager and since Bannock County operates only one (1) facility, this is not a requirement per the standard.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator <p>The Bannock County Detention Center does not contract with other private agencies or entities for the confinement of its inmates. As reported in the PAQ and per the Detention Captain/PREA Coordinator, the agency has not entered into or renewed a contract for the confinement of inmates since the last PREA Audit.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>

115.13	Supervision and monitoring
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Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Idaho Jail Standards
- Bannock County Detention Administration 2023 Proposal for Staffing
- Policy 1.11, Administrative, Staffing Plan
- Policy 10.1, Sexual Misconduct, General Provisions
- Policy 13.8, Security, Walks/Security Checks
- Unannounced PREA Rounds
- Staffing Plan Review
- Documentation of Unannounced Rounds

Interviews Conducted:

- Detention Captain/PREA Coordinator
- Detention Staff

The Bannock County Detention Center (BCDC) ensures that the facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate staffing levels, and video monitoring to protect inmates against sexual abuse. Per the PAQ, a review of the documentation and the interview with the Detention Captain/PREA Coordinator, the facility makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, video monitoring, to protect inmates against sexual abuse. In calculating adequate staffing levels and the need for video monitoring, the facility considers the following:

- Idaho Jail Standards.
- Any judicial federal or state investigation or inspection and internal/external agency findings of inadequacy.
- Applicable state or local laws, regulations, national standards, or any other relevant factors.
- All components of the facility's physical plant (including "blind spots" or areas where staff or inmates may be isolated).
- The composition of the inmate population.
- The number and placement of supervisory staff.
- Institution programs occurring on a particular shift.
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
- Any other relevant factors.
- Generally accepted detention practices.

Since the last PREA audit, the average daily number of inmates which the staffing

plan was predicated was two hundred eighty-five (285). Per the facility's staffing plan, and unless exigent circumstances, the policy of the BCDC is to have a minimum staffing of eight (8) Deputies per shift with at least one (1) Deputy being a female and one (1) being a supervisor, either a Corporal or Sergeant. If a Deputy calls in sick for their shift, the Shift Supervisor will refer to the "on-call list" for that date, starting with the primary on-call deputy followed by the secondary deputy. In the event both the primary and secondary on-call deputies are excused, the Shift Supervisor will call those deputies on days off until coverage is found. Classification/Booking Deputies are required to sign up for the on-call list. These guidelines ensure the minimum staffing requirements are met. In the event there is a circumstance in which the staffing plan is not complied with, the facility will document and justify all deviations from the plan. The Scheduling Sergeant is responsible for ensuring adequate staffing levels are met. The on-call system offers overtime to staff and ensures the shifts are covered. Per the Detention Captain/Detention Captain/PREA Coordinator, if the population drops, they will never reduce the number of staff assigned to work in any of the housing units. According to the PAQ and per the Detention Captain/Detention Captain/PREA Coordinator, there have been no instances in which there have been deviations from the staffing plan.

The Bannock County Detention Administration, with the assistance of the facility Detention Captain/Detention Captain/PREA Coordinator, will conduct a staffing analysis no less than once a year to assess, determine, and document whether adjustments are needed to ensure adequate levels of staffing and video monitoring systems are in place to protect inmates against sexual abuse. The review, discussion, and analysis of the staffing plan is conducted by the Detention Captain/Detention Captain/PREA Coordinator, two (2) Lieutenants, the Chief Deputy, and the Sheriff.

This staffing analysis is documented in the facility's Jail Management System (JMS). Final copies of all documentation supporting the staffing analysis are forwarded by email to the Chief Deputy and to the Sheriff. The last staffing plan review was conducted on December 22, 2022. It was determined at that time, that due to additional demands (medical security, medical coverage shortages on nights/potential for inmate ambulance transport, increased inmate population, increased demand for "zoom" courts/attorney-inmate access, and inability to hire a medical contract security staff), the staffing coverage plan would be increased from one (1) rover position to two (2) rover positions to ensure adequate staff coverage.

The BCDC requires that intermediate or higher-level supervisors conduct unannounced rounds to identify and deter staff-on-inmate sexual abuse and sexual harassment. Per policy 10.1, Supervisory Staff, Corporals, and the Detention Captain, will conduct and document unannounced rounds at least once a week on both dayshift and nightshift to identify and deter staff sexual abuse and sexual harassment. The policy explicitly states, "No staff shall alert other staff members that these supervisory rounds are occurring." The Auditor reviewed documentation of unannounced rounds. Interviews with staff indicate that unannounced rounds occur on a random basis and that they understand they are prohibited from alerting other staff that the rounds are occurring.

Detention Center staff are required to conduct rounds in the housing units at least

	<p>every thirty (30) minutes. Policy 13.8 requires staff to provide well-being checks on inmates to verify they are safe in their living quarters and that security is being maintained within the housing unit. Periodic well-being checks are required to be conducted in all areas of the detention center that are occupied by inmates and these checks are documented. This includes all living areas and when occupied, all program, recreation, visitation, and holding areas. Staff conducting the well-being check/walk will take time to talk to inmates when they are awake to be more aware of potential problems in the living quarters. Staff are required to conduct rounds with the use of Guard1, (an electronic device which records and documents rounds as they are conducted at each cell or housing unit). Supervisors are able to review the Guard1 documentation in the Jail Management System to ensure rounds are completed as required per policy.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility EXCEEDS the requirements of this standard.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 2.1, Admissions, Intake • Policy 5.2, Classification, Primary Classification • Policy 6.2, Special Needs Juvenile • Daily Population Reports August 2022 to July 2023 <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/Detention Captain/PREA Coordinator • Detention Staff <p>The BCDC does not house youthful inmates at their facility. However, if they were to accept youthful inmates in the future a policy was written to provide guidance on how to protect them from sexual abuse and sexual harassment. Policy 5.2 prohibits placing youthful inmates in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through the use of a shared dayroom or other common space, shower area or sleeping area. Policy 6.1 states juveniles will not be housed with adult inmates and will be kept out of sight and sound of adult inmates. Per the Detention Captain/Detention Captain/PREA Coordinator, the facility does not house anyone who is under the age of eighteen</p>

(18).

Policy 2.1 states, *“No persons under the age of eighteen shall be admitted to the Detention Center unless approved by the Sheriff. Only those waived to adult court on criminal charges or those convicted (adjudicated) in adult court of criminal charges will be considered for incarceration by the Sheriff. The Bannock County Detention Center will make every effort to comply with the Idaho Prison Rape Elimination Act as outlined in Chapter 5.2”*

The facility does not have a dedicated housing unit in which to house a youthful inmate. As previously stated by the Detention Captain/Detention Captain/PREA Coordinator, it would be a very rare circumstance in which they would house a youthful inmate. The last time the facility housed a youthful inmate was in 2005. In the event, a youth was placed in the facility who was waived to adult court, the youth would not be placed in an adult housing unit and would be housed in an area of the facility with direct staff supervision and sight, sound, and physical contact separation with adult inmates will be maintained in all areas of the facility. This includes common space, shared dayroom, exercise areas, shower area, or educational and programming areas of the facility.

Per policy 5.2, the facility will make its best efforts to avoid placing youthful inmates in isolation to comply with the above provisions unless exigent circumstances apply. Youthful inmates’ access to large muscle exercise, legally required education services, and other program or work opportunities will not be denied unless exigent circumstances apply. If exigent circumstances apply, the event will be documented in the inmate’s log by generating a Youthful Inmate Isolation (YII) event detailing the exigent circumstance.

- In the past twelve (12) months, there were no youthful inmates assigned to a housing unit that provides sight and sound separation between adult offenders.
- In the past twelve (12) months, there were no youthful offenders placed in the same housing unit as adults in this facility.
- In the past twelve (12) months there were no youthful inmates who have been placed in isolation in order to separate them from adults.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 2.2, Admissions, Searches Upon Admission
- Policy 1.6, Administrative, Cross-Gender Supervision
- Policy 2.1, Admissions, Intake
- In-house Training Synopsis on Searches
- Search Preference Form
- Cross-Gender Pat-Down Search Form

Interviews Conducted:

- Detention Center Staff
- Detention Captain/Detention Captain/PREA Coordinator
- Inmates

BCDC Policy 2.1 states *“A Detention Deputy of the same gender as the inmate will normally complete all strip searches except in exigent circumstances.”* Policy 2.2 states *“a cross-gender strip search shall only be conducted under exigent circumstances and said strip search shall be documented.”* In the past twelve (12) months, there were zero (0) cross-gender strip or cross-gender visual body cavity searches of inmates. Per policy, all body cavity searches shall be conducted only by licensed physicians or medical personnel designated by a physician. The policy states *“the only persons, other than the inmate present during the search shall be medical personnel as are necessary and proper under existing community standards, to perform such a procedure and the least number of Detention staff appropriate for the security level of the inmate. Only Detention staff of the same gender as the inmate will be allowed to be present.”*

Bannock County Detention Center Policy 2.2 states a deputy of the same gender as the inmate shall conduct the pat-down search unless exigent circumstances apply. There were zero (0) cross-gender pat-down searches of females. According to the policy, detention staff will not restrict female inmate’s access to regularly available programming or other out-of-cell opportunities to comply with this provision. This policy is consistent with information gathered during interviews with staff and inmates.

BCDC Policy 1.6 addresses cross-gender supervision and the limits of cross-gender viewing of inmates. The policy states *“The Bannock County Detention Center will implement practices to ensure that all inmates are able to shower, perform bodily functions, and change clothing without 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 of which the staff member announced their presence prior to entering the inmate housing unit. This includes viewing via video camera.”* The following incidents include, but are not limited to circumstances that may be considered exigent circumstances:

1. Crime in progress.

2. Inmate is injured or incapacitated.
3. Inmate is inflicting self-harm.
4. Inmate is experiencing a psychotic episode.
5. Inmate refuses to put on clothing.
6. Inmate's life is in jeopardy.
7. Any circumstance that requires immediate backup response as needed.

Interviews with staff and inmates alike, confirmed inmates are able to use the bathroom, change clothing, take a shower, and perform any personal hygiene without staff of the opposite gender viewing their buttocks, breasts, or genitalia except in exigent circumstances. BCDC policy also requires staff to announce their presence when entering a housing unit of inmates of the opposite gender. Interviews with staff and inmates as well as observation during the facility tour and the on-site visit confirm that staff are announcing their presence loudly and clearly by yelling "Clear" before entering the housing unit opposite their gender. Many staff stated they make the announcement and hesitate before entering in order to allow the inmates to be fully clothed. Inmates stated they were never viewed by staff of the opposite gender while showering, using the toilet or changing clothing.

Per Policy 2.1, staff members, except medical Staff, shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the genital status is unknown, it may be determined through conversation with the inmate, by reviewing medical records, or by a medical examination by medical staff. Staff will document on a Search Preference Form (SPF) the transgender or intersex inmate's search preference, (the sex of staff the inmate would prefer to conduct searches). This information is maintained in the Jail Management System. There were no intersex or transgender inmates housed at the facility at the time of the audit, therefore no interviews conducted with this targeted population. Interviews with staff confirm their understanding that these types of searches are prohibited.

Per policy, if the gender (genital status) of the inmate cannot be readily determined (e.g., the inmate is transgender or intersex) then the pat-down search may be considered a cross-gender pat-down search. A cross-gender pat-down search of an inmate will be documented by adding the abbreviation CPAT (cross-gender pat-down search) under the inmate's log in the JMS. The deputy will articulate the exigent circumstance. Staff conducting such searches shall do so in a professional and respectful manner in the least intrusive manner possible.

The BCDC trains 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. The training is held during initial staff training and refresher training annually. There were forty-seven (47) staff who received this training during the reporting period.

The title of the training "*Conducting professional & respectful searches of cross-gender, transgender, or intersex inmates training,*" is an hour-long training consisting

	<p>of the definitions of Transgender and Intersex, an overview of policies 2.1 and 2.2, documentation of cross-gender and strip searches, transgender and intersex pat-down searches, a demonstration of these types of searches, and conducting searches with dignity and professionalism. Interviews with staff confirm they have received the training and are aware of how to conduct searches of inmates professionally and respectfully and their responsibility to document cross-gender pat-down and strip searches as well as searches of transgender and intersex inmates.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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<p>115.16</p>	<p>Inmates with disabilities and inmates who are limited English proficient</p>
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 2.6, Admissions, Inmate Orientation • Policy 6.4, Special Needs, Physical Disabilities/Medical • Sexual Awareness Poster (Spanish) • Inmate Handbook Receipt Form (Spanish) • PREA Reporting Brochure for Inmates (Spanish) • Language Line Instruction Sheet (Booking) <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Staff • Limited English Inmate <p>The agency has established procedures to provide disabled inmates 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. Bannock County Detention Center Policy 6.4 states <i>“When an inmate with physical disabilities is incarcerated, the Bannock County Detention Center will make every effort to comply with the Americans with Disabilities Act (ADA) as it applies to detention facilities. Staff must make efforts to communicate effectively with individuals with disabilities, including those who are deaf or hard of hearing, have impaired speech or vision, or are blind.”</i> If the inmate is hearing impaired, visually impaired, has limited reading skills, has intellectual, psychiatric, or speech disabilities, or is otherwise disabled, the Classification/Booking Deputy or designee shall provide said education in a format the inmate can understand and fully comprehend. Normally, effective</p>

communication can be achieved by exchanging written notes (deaf or hearing impaired), verbally or with recordings or with written documents/notes with enlarged print (blind or vision impaired). The facility provides the following types of assistance to inmates:

Interpretation Services:

- Idaho Council for the Deaf and Hard of Hearing may be referenced and/or contacted for a list of qualified interpreters.
- Purple Video Relay Services has been installed in conjunction with
- the facility's inmate communications system to provide interpretation services.

TTY and Relay Services:

- TY Services (also known as telecommunications device for deaf people, or TDD) is a feature provided by the facility's inmate communications system. The facility also has a TTY device in the event the inmate communications system malfunctions.

Detention Staff are required to document the type of communication services utilized as well as maintain all written notes by placing them with the booking paperwork.

The agency has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Such steps shall include providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. Per policy 2.6, if the inmate has limited or no English proficiency, the Detention Deputy will make attempts to provide or locate an interpreter. If an interpreter is not available, Language Line Solutions Interpretation System may be used. Instructions and contact information to Language Line Solutions was observed in a prominent and accessible location to Detention Staff in the Booking area of the facility. When interviewed, staff were able to describe the steps, they would take to secure interpretative services for an inmate.

Bannock County Detention Center Policy 2.6 states *"Inmate interpreters shall not be used except in limited circumstances where an extended delay could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations."* Per policy, in the event of an exigent circumstance an inmate interpreter, reader or other type of inmate assistant was used, this information would be documented. In the past twelve (12) months, there were no instances in which an inmate interpreter was used. Interviews with staff confirmed that they would not utilize an inmate to interpret for another inmate and that would never be allowed. Detention Staff reported there are many Detention Staff who work at the facility who are bilingual and that there are also interpreter services available. The facility has the capability to provide written PREA information to the inmates in multiple languages

when needed.

During the on-site tour of the facility, the Auditor spoke to a Spanish speaking inmate who reported he was not provided PREA information in Spanish during his intake. The Auditor requested an interpreter assist in an interview with the Spanish speaking inmate. An outside interpreter was immediately provided. The inmate stated there are deputies at the facility that speak Spanish and that they would assist him if needed. He stated he remembered watching a video about PREA, but not being provided the papers he signed in Spanish. A review of his file indicated he was provided with PREA education, but not in his first language which was Spanish.

Corrective Action Plan - Provide the current and future Spanish speaking inmates, with all PREA information during booking, classification, and the bi-monthly training in Spanish. Provide the Auditor with copies of the current inmate's signature and date indicating he received this information. The facility provided additional PREA education to the inmate in Spanish and ensured the inmate signed forms given to him in Spanish. The Auditor reviewed the information requested regarding the Spanish speaking inmate.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none">• Pre-Audit Questionnaire (PAQ)• Policy 1.10, Administrative, Hiring and Promotion Decisions• Idaho Jail Standards• Interview Questions List for New Hires• Background and Continuing Affirmative Duty to Disclose Questions• Criminal Background Records Checks for Newly Hired Staff, Contractors, and Volunteers• Five-Year Criminal Background Record Checks for Staff, Contractors, and Volunteers <p>Interviews Conducted:</p> <ul style="list-style-type: none">• Hiring and Backgrounds Captain• Detention Captain/PREA Coordinator <p>As written in Policy 10.1, the BCDC will not hire or promote anyone who may have</p>

contact with inmates, and will not enlist services of any contractor who may have contact with inmates who:

- 1) 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).
- 2) Has been convicted of engaging or attempting to engage in sexual abuse 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.
- 3) Has been civilly or administratively adjudicated to have engaged in the abuse described in paragraph (2) of this section.

Bannock County Detention Center considers any incidents of sexual misconduct in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The hiring and backgrounds process begins with the application and screening process. The Backgrounds Captain runs background checks on new applicants utilizing a variety of programs to review the applicant's history. He uses TransUnion's TLO (The Last One) program which collects property, vehicle registration, and driver's license information, the International Law Enforcement Telecommunications System (ILETS), National Crime Information Center (NCIC), and iCourt (Idaho Court data base) which provides information on Idaho driving citations and Idaho criminal records.

In addition to the information gathered from the local, state, and federal data bases, the Hiring and Backgrounds Captain contacts 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. Additionally, he routinely contacts all references on the application, including spouses or significant others to see if there are anger issues, alcohol, or other drug involvement. In the past twelve (12) months there were fourteen (14) persons hired who have contact with inmates who had criminal background record checks.

The BCDC also performs criminal background record checks before enlisting the services of any contractor who may have contact with an inmate. The Auditor reviewed criminal background record checks for the contractors assigned to the facility. In the past twelve (12) months, there were two (2) contracts for services where criminal background record checks were conducted on all staff covered in the contract who have contact with inmates.

Criminal background record checks are conducted at least every five (5) years on current employees, and contractors who have contract with inmates. The Auditor reviewed five-year criminal background record checks for the employees and contractors assigned to the facility. Per policy, *"documentation of the background records checks of current employees and long-term contractors at five-year intervals will be kept on file and made available to the PREA Auditor when requested."*

New applicants and employees seeking promotion who may have contact with inmates are asked about previous misconduct during the interview process and

during the promotion process. Volunteers are also required to sign this form. Employees also have a continuing affirmative duty to disclose any such misconduct and are required to sign a form with the following questions:

1. Have you ever been accused of, or engaged in, sexual abuse, sexual misconduct, or sexual harassment of an inmate in a prison, jail, community confinement facility, juvenile facility, or other institution?
2. Have you been convicted of engaging or attempting to engage in sexual abuse 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?
3. Have you been administratively adjudicated to have engaged in abuse described in question (2) above?
4. Have you been accused of retaliation against an inmate who reported sexual abuse, sexual misconduct, or sexual harassment?
5. I acknowledge that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.
Yes_____”

Per policy 1.10, *“Material omissions regarding such misconduct, or the provision of materially false information shall be grounds for termination.”* The BCDC will 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.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.18 Upgrades to facilities and technologies	
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Facility Schematics <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Random Staff

The Bannock County Detention Center has not acquired a new facility or made a substantial expansion or modification to the existing facility since the last PREA Audit. The Detention Captain/PREA Coordinator reported if there were plans to expand the facility, they would consider a design that would provide for the ease of supervision of the inmates by the staff. The facility will consider the effects of a proposed design, expansion, or modification upon the agency's ability to protect the inmates from sexual abuse.

The BCDC considers how technology will enhance the agency's ability to protect inmates when updating their video monitoring system, electronic surveillance, and other monitoring technology. The facility routinely reviews and upgrades the camera and monitoring systems to enhance staff supervision of the inmates. Per the Detention Captain/PREA Coordinator, they have tried to cover all areas of the facility (absent inmate bathroom areas), with cameras that provide multiple and overlapping views in the same location. He stated it would be nearly impossible to find an area (absent inmate bathroom areas), that is not monitored. The facility has a contractor who can log in remotely to fix any problems that come up with any of the cameras. Additionally, the Detention Captain/PREA Coordinator and two (2) Lieutenants can log in to the video monitoring system remotely to view the cameras and view staff in the course of their duties to ensure proper supervision practices are being followed to protect the safety and security of the inmates. The video monitors are constantly being viewed in multiple locations, by multiple staff as well as supervisors, and any issues with a camera, or if a blind spot were to be identified, it would be immediately addressed.

During the facility tour, the Auditor observed the camera locations in comparison to the cameras notated on the facility schematics. Security mirrors were also noted in numerous areas throughout the facility which aids in staff's supervision of the inmates. The Auditor also observed the video monitors in the control room and all one hundred twenty-seven (127) cameras appeared to be functioning. Staff in the control room were observed actively monitoring the live video camera feed on the various monitoring screens.

The facility has made it a priority to routinely review the video monitoring system, the need for additional cameras and utilizes a contractor to assist in the maintenance of the system in an effort to ensure the safety and security of the inmates.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **EXCEEDS** this standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review
- Policy 10.3, Sexual Misconduct, Operations
- Idaho State Police Physical Evidence Collection Manual
- Memorandum of Understanding (MOU) Family Services Alliance of Southeast Idaho
- Bannock County Website
- PREA Brochure for Inmates
- Letter to Tri-County Sheriff Investigators

Interviews Conducted:

- Detention Captain/PREA Coordinator
- Medical Staff
- Facility Investigators
- Director of Family Services Alliance of Southeast Idaho

Per the Detention Captain/PREA Coordinator, the BCDC will initiate either an administrative or criminal investigation immediately after the report of sexual harassment or sexual assault of an inmate or staff member. The agency website states *“The Bannock County Detention Center will initiate either an administrative or criminal investigation as soon as possible after the report of sexual harassment or sexual assault of an inmate or staff member. Allegations that involve potentially criminal behavior will be investigated by an agency with the legal authority to conduct criminal investigations.”* According to policy 10.4, all investigators are required to follow uniform evidence protocol, ensure the victim is offered forensic medical examinations, and provide victim advocates as necessary. The Idaho State Police Physical Evidence Manual provides investigators guidelines for physical evidence preservation and collection following a sexual assault.

Policy 10.4 states *“the Investigator’s protocol shall be developmentally appropriate for youth, where applicable and, as appropriate, shall be 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.”*

The BCDC offers inmates who have suffered sexual abuse access to forensic medical examinations through the Portneuf Medical Center in Pocatello, Idaho. Facility medical staff when notified of the sexual assault, will arrange for prompt medical attention, and when the assault occurred within one hundred and twenty (120) hours, a forensic medical examination, without financial cost to the victim. Forensic medical examinations will be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) when possible. When SAFEs or SANEs are not available, a qualified medical practitioner will perform the forensic medical exam.

The facility does not offer forensic medical exams on-site but will provide medical care following the inmate's return to the facility from the hospital. Per interviews with facility medical staff, they would provide follow-up care per the hospital's instructions and any needed follow-up and/or specialty care. The Investigator or staff member who accompanies the inmate to the forensic medical exam will document who performed the forensic medical exam within the Detention or Law Incident report associated with the investigation. In the past twelve (12) months, there were no forensic medical exams involving inmates at the facility.

The BCDC maintains a Memorandum of Understanding (MOU) with the Family Services Alliance of Southeast Idaho, located in Pocatello, Idaho. The purpose of the MOU is to ensure mutual support between the parties for the purpose of compliance with the Federal Mandates of the Prison Rape Elimination Act in which the BCDC must provide inmates of sexual abuse with access to victim advocates for emotional support. The MOU establishes terms and conditions upon which the Family Services will provide said victim advocates. Per the MOU and an interview with the Executive Director of Family Services Alliance of Southeast Idaho, the agency will provide on-site crisis intervention when a victim discloses sexual assault or rape. The on-call Advocate will meet the Bannock County Sheriff's Deputy at the Portneuf Medical Center if the victim is to receive a forensic exam.

Crisis intervention will be provided to the victim and if on-going mental health counseling is needed by the victim, Family Services Alliance of Southeast Idaho can provide mental health counseling. The Family Services Alliance of Southeast Idaho mental health counselors are trained in the trauma of sexual assault and has skills to assist the sexual assault survivor in healing from the trauma of assault and maintains the appropriate licensures. If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. Inmates are provided a PREA brochure at the time of intake which includes the name, address, and telephone number, of the Family Services Alliance of Southeast Idaho which lists the victim services they provide.

The BCDC has investigators within the facility who conduct administrative investigations. Allegations that appear clearly criminal will be assigned to a Detective within the Bannock County Sheriff's Office. All allegations of sexual abuse of an inmate, involving a staff member, are referred outside of Bannock County to the external Tri-County Sheriff's Investigators. The Tri-County Sheriff's Investigators consists of other County Sheriff Department's Investigators who assist other counties to conduct an impartial and unbiased investigation involving potential staff-on-inmate abuse. In a letter to the Tri-County Sheriff's Investigators, the agency has requested that the responsible agency follow the requirements of §115.21 (a) through (e) of the standards regarding uniform evidence protocol, forensic medical examinations, and victim advocates as necessary.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="256 188 991 224">Auditor Overall Determination: Exceeds Standard</p> <hr/> <p data-bbox="256 264 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 340 619 376">Interviews Conducted:</p> <ul data-bbox="331 443 1046 600" style="list-style-type: none"> • Detention Captain/PREA Coordinator • Detention Staff • Bannock County Sheriff’s Department Detective • Facility Investigators <p data-bbox="256 640 612 676">Documents Reviewed:</p> <ul data-bbox="331 743 1382 1070" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review • Bannock County Website • Investigation Files of Inmates • First Responder Checklist • Investigator Checklist • Letter to Tri-County Sheriff Investigators • Specialized Training Certificates of Investigators <p data-bbox="256 1111 1477 1518">The BCDC ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct. The facility will initiate either an administrative or criminal investigation as soon as possible after the report of sexual abuse or sexual harassment of an inmate or staff member, per policy 10.4. There were three (3), allegations of sexual abuse and three (3) sexual harassment received in the past twelve (12) months of which, all six (6) of the allegations resulted in an administrative investigation and zero (0) allegations were referred for criminal investigation. All administrative investigations in the past twelve (12) months were completed.</p> <p data-bbox="256 1559 1477 2056">Agency policy requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations. Upon receiving notification, via any of the reporting methods made available, it is the Shift Supervisor’s responsibility to regularly contact the inmate to ensure their wellbeing. The Shift Supervisor will make an initial determination if the incident is a “minor” or “major” PREA incident to determine what avenue of investigation will be completed. A minor incident would involve sexual harassment, voyeurism, or minor sexual abuse involving slight inmate-to-inmate touching. A major PREA incident would be sexual abuse involving the mouth, penis, anus, breasts, vagina, buttocks, etc. either inmate-to-inmate, or staff-to-inmate, volunteer, or contract workers. Minor PREA allegations will have an administrative investigation conducted by the Detention Center Investigators There are eight (8) investigators</p>

assigned to the facility. Major PREA allegations involving inmate-on-inmate involves nonconsensual contact and would result in a criminal investigation being completed by the Bannock County Sheriff Detective's Division Investigators.

If the Shift Supervisor determines the PREA incident is minor in nature, or consensual, they will notify the Detention Administration and the Detention Investigation Sergeant or their designee and will immediately begin an investigation of the minor, or consensual PREA incident. If the Shift Supervisor determines that the PREA incident is major in nature, they will notify the Detention Administration and the Bannock County's Detective's Division who will immediately begin an investigation of the major PREA incident. Both minor and major PREA incidents are documented in the Reported PREA Allegation Log (RPA) and the Jail Incident Log and will reflect the nature of investigation as "PREA" for tracking purposes and will include the inmate's name and what actions were taken.

If the Bannock County Detective's Division Investigator or the BCDC determines there is criminal conduct during the initial investigation, they will confer with the Sheriff whether to refer the investigation to an outside or external investigator or whether the allegations will be criminally investigated upon the review of the allegation. If the incident is sexual conduct between an inmate and a staff member, volunteer or contracted employee, the investigation will automatically be referred to an outside external investigator. The Tri-County Sheriff Investigators will conduct the external investigation. Tri-County Sheriff's Investigators consists of other County Sheriff Department's Investigators who assist other counties to conduct an impartial and unbiased investigation involving potential staff-on-inmate abuse. There is a standing written agreement between the counties involved and the three-man team is often a mix from several jurisdictions per the Detention Captain/PREA Coordinator.

Upon completion of the investigation, the Bannock County Detectives Division or external investigator will advise the Bannock County Detention Center Administration of the outcome of the investigation. The Bannock County Detention Administration will complete documentation regarding any actions taken against the "*suspect inmate*" as well as the "*victim inmate*." PREA incidents involving staff members, volunteers or contracted employees will be documented in a way to afford them privacy and such documentation would only be accessible by those conducting the investigation. If the Tri-County Sheriff's Department is conducting the investigation, the Detention Captain/PREA Coordinator would maintain contact to ascertain the status of the investigation.

Upon completion of any investigation, minor or major in nature, the Detention Investigation Team Leader or a Detention Administrator will enter the appropriate clearance information under the Jail Incident Log with the determination, closed-substantiated, closed-unsubstantiated, or closed-unfounded. The BCDC's policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation is published on the Bannock County Sheriff's Department website. Policy 10.4 is detailed in describing the responsible parties for conducting administrative or criminal investigations of sexual abuse and sexual harassment in the Bannock County Jail.

There are eight (8) investigators assigned to the facility and two (2) detectives within the Sheriff's Department assigned to investigate PREA incidents. All investigators have received additional specialized training through the National Institute of Corrections (NIC). All facility investigators as well as those assigned to the Sheriff's Office Detective's Division have completed the *"Investigation Sexual Abuse in Confinement Setting: Advanced Investigations"* training. The Auditor reviewed employee files containing this documentation. Interviews with facility investigators and a detective with the Sheriff's office confirm investigators are very knowledgeable of the investigation process per agency policy as well as the requirements under this standard. They were able to explain their process once assigned an investigation and the steps they would adhere to per the investigator checklist. All facility investigators were able to describe what they would do if during their initial investigation, they learned the incident was of a criminal nature. Any additional information gathered would be discussed with the team leader who would then submit the information to the Detention Captain/PREA Coordinator who would make the decision if the investigation should be assigned to the Sheriff's Department Detectives or the Tri-County Investigators. The facility has detailed policies and procedures in place to ensure referrals of allegations for investigations and a review of eight (8) investigation files indicate the facility is completing administrative and criminal investigations for all sexual abuse and sexual harassment allegations.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **EXCEEDS** this standard.

115.31	Employee training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.1, Sexual Misconduct, General Provisions • Policy 10.4 Sexual Misconduct, Investigation/Discipline/Incident Review • Staff PREA PowerPoint Training • Staff PREA Training Rosters <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Detention Staff <p>The Bannock County Detention Center Administration provides all staff annual training on how to prevent, detect, and report rape and sexual activity related to this</p>

policy. This training will include:

1. Training on Policy and Procedure.
2. Training during new employee orientation and/or during the FTO process.
3. Training on recognizing possible cases or victimization.
4. Training on classification procedures.
5. General training on recognition, prevention, and investigation of sexual misconduct and how to fulfill their responsibilities.
6. Its Zero-Tolerance Policy for sexual abuse and sexual harassment.
7. Inmate's rights to be free from retaliation for reporting sexual abuse and sexual harassment.
8. The rights of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
9. The dynamics of sexual abuse and sexual harassment in confinement.
10. The common reactions of sexual abuse and sexual harassment victims.
11. How to detect and respond to signs of threatened and actual abuse.
12. How to avoid inappropriate relationships with inmates.
13. How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.
14. How to comply with the relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Per policy 10.4, all investigators will receive on-line specialized training through the National Institute of Corrections (NIC). *"Investigating Sexual Abuse in a Confinement Setting"* which must be completed by the investigators prior to conducting a sexual abuse investigation within the facility.

New employee training and the yearly refresher training consists of a comprehensive PowerPoint presentation that covers all the topics required in §115.31 (a). This PowerPoint presentation goes into further detail providing an in-depth and thorough discussion on the following additional topics:

- Reporting methods for inmates.
- Classification's role of educating inmates to PREA.
- Discussion of Screening information and process.
- Describe various acts that constitute abuse.
- Consensual sex.
- False Allegations.
- Confidentiality.
- Shift Supervisor's role.
- Medical and mental health examination requirements.
- Investigation requirements and process.
- Outside victim advocacy.
- Challenges regarding inmate sexual abuse and sexual harassment that occurs in a facility.

- Consequences of sexual abuse.
- Disciplinary consequences for a staff member.

Bannock County Detention Center has just one facility that houses both male and female inmates; thus, staff are trained to work with both genders. Staff are required to complete a written test at the end of the initial PREA training or refresher PREA training. Additionally, staff are required to sign an attendance roster verifying they understand the training they received. The Auditor reviewed staff training records verifying all staff at the detention facility had received the initial PREA training and the refresher PREA training. Interviews with random and specialized staff indicated they are well-informed of the facility's policies and procedures regarding the prevention, detection, and response to an incident of sexual abuse or sexual harassment. Staff were able to confidently discuss the steps they would take if an incident were to occur at the facility. Overall, staff are well-trained and have extensive knowledge of the requirements of this standard.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **EXCEEDS** this standard.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.1, Sexual Misconduct, General Provisions • PREA PowerPoint Training for Volunteers and Contractors • Training Rosters for Volunteers and Contractors • PREA Brochure for Volunteers and Contractors <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Contracted Medical Staff • Contracted Mental Health Staff • Volunteers <p>The BCDC ensures all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the facility's sexual abuse and sexual harassment prevention, detection and response policies and procedures. Contractors include medical and mental health staff, kitchen staff, and a computer contractor. There were one hundred and twenty (120) volunteers and contractors who have</p>

contact with inmates who were trained on the agency's Zero-Tolerance Policy against sexual abuse and sexual harassment and the facility's policies and procedures regarding sexual abuse prevention, detection, and response. Upon hire or at the initiation of services, the volunteer or contractor is required to attend PREA training at the facility. The level and type of training provided to volunteers and contractors is based on the services they provide and the level of contact they have with inmates. This comprehensive training consists of a PowerPoint presentation covering the following objectives:

- Bannock County Sheriff's Office Zero-Tolerance Policy on sexual abuse, sexual harassment, and retaliation.
- The volunteer and contractor's duty and responsibility to detect, prevent and report sexual abuse.
- List of sexual abuse warning signs of sexually abused inmates.
- List of ways sexual abuse can be reported by inmates.
- Descriptions of the various acts that constitute sexual abuse of an inmate on another inmate.
- Confidentiality and retaliation.
- The volunteer's and contractor's roles upon receiving a report of abuse.
- False reporting.
- Reporting requirements upon receiving a report that occurred at another facility.
- Investigation requirements upon receiving a report from another facility that occurred at the Bannock County Detention Center.
- Overview of the Idaho Law regarding sexual relationships between staff members, volunteers, contractors, and inmates.
- How to communicate effectively and professionally with lesbian, gay, bisexual, transgendered, intersex, and gender non-conforming inmates.
- Description of the various acts that constitute sexual abuse of an inmate by a staff member, volunteer, or inmate.
- Advisement of criminal backgrounds checks.
- Volunteers and contractors' role in reporting staff to inmate abuse.

At the conclusion of the PREA training, volunteers and contractors are required to sign a document stating that they understand the training they have received. This documentation is maintained by the Detention Captain/PREA Coordinator. The Auditor was provided volunteer and contractor training records confirming they all received PREA training. Three (3) contractors and three (3) volunteers were interviewed and were able to articulate how they would report an incident or a suspicion of sexual abuse or sexual harassment of inmates at the facility. Further, the volunteers and contractors interviewed stated they were informed of the agency's Zero-Tolerance Policy and the inmate's right to be free from retaliation for making a report.

The facility has also developed a PREA brochure for volunteers, contractors, and vendors of the Bannock County Detention Center. This PREA brochure ensures that all individuals who enter the facility may have any potential contact with inmates, including sight/sound, have been provided with PREA information. The brochure

	<p>contains information on the facility’s Zero-Tolerance Policy, how to maintain appropriate boundaries, duty to report, how to report, and reporting contact information. All volunteers, contractors and vendors who enter the facility are required to sign an acknowledgement form indicating their understanding of the facility’s PREA policies and their duty to report.</p> <p>The facility provides comprehensive training to volunteers and contractors and interviews with these individuals found they were very knowledgeable about what actions they would take if they suspected abuse of an inmate. Additionally, the PREA brochure ensures that even the one-time vendor who enters the facility or other individual has received the PREA information. Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility EXCEEDS this standard.</p>
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115.33	Inmate education
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 2.6, Admissions, Inmate Orientation • Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review • PREA Brochures • PREA Information in Spanish • Inmate Informational Handbook • PREA Posters in English and Spanish • PREA Video at Booking • PREA PowerPoint at Medical • Inmate files <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Classification/Booking Deputies • Random Staff • Random Inmates • Limited English Proficient Inmate • Targeted inmates <p>Policy 2.6 states, <i>“Upon intake, whether the inmate is a new arrest or being transferred from another facility, a Classification/Booking Deputy or designee will conduct a comprehensive education session covering the Sexual Harassment/Sexual</i></p>

Abuse section of the Inmate Handbook and the Local Rape Crisis Service section of the PREA Pamphlet with each inmate.” During the intake process, the new inmate is required to sit in the PREA/Assessments room and watch a PREA video. This video explains the facility’s Zero-Tolerance Policy towards all forms of sexual abuse and sexual harassment, and how to report incidents or suspicions of abuse. The Classification/Booking Deputy goes over the information in the video responding to any questions or concerns. After watching the video, the inmate is provided with the PREA handbook and brochure and is required to sign a form acknowledging their receipt and understanding of the information they received.

In the booking area of the facility, the Auditor observed PREA information to include a Zero-Tolerance Notice, sexual assault awareness poster, suicide prevention poster, Victim Information and Notification Everyday (VINE) and telephone numbers and address to the local rape crisis center. Policy 2.6 states *“the classification deputy will ensure the inmate fully understands our zero-tolerance policy regarding sexual harassment and sexual abuse, how to report incidents or suspicions of sexual abuse or sexual harassment and the zero-tolerance policy regarding retaliation for reporting.”* A Classification/Booking Deputy completed a mock demonstration of the intake process for the Auditor. The Classification/Booking Deputy stated they would wait to conduct the PREA education on an inmate who was under the influence of drugs or alcohol at the time of booking until the inmate was sober, but the education would occur within seventy-two (72) hours. After the inmate watches the PREA video, the Classification/Booking Deputy would ask questions of the inmate to test their understanding of the information they received and will follow-up with additional explanation if needed. There were two thousand eight hundred and seventy-seven (2877) inmates admitted to the facility in the past twelve (12) months who received PREA information at the time of intake. The Auditor reviewed twenty-eight (28) inmate files indicating each inmate received PREA training at the time of intake.

All inmates receive comprehensive PREA information at intake and two (2) times each month they receive additional PREA education during the unannounced PREA rounds (UPR) capturing both day and night shifts. Comprehensive PREA education conducted during the UPRs is conducted in each housing unit and documented. During these rounds, supervisory staff will read the information to the inmates, verify they understand the information provided and answer any questions the inmates may have about PREA. The following information is verbally provided by supervisory staff and discussed with the inmates:

- The facility’s Zero-Tolerance Policy towards all forms of sexual abuse and sexual harassment
- Reporting sexual abuse and reporting information
- Retaliation for reporting abuse
- Sexual contact
- Sexual conduct
- Victim advocacy and local rape crisis services available
- Agency policy and procedure for responding to sexual harassment/abuse

If an inmate does not speak English, staff will locate a staff interpreter to provide the information or utilize Language Line. The inmate will be provided the PREA information in their spoken language. There were five hundred and ninety-five (595) inmates admitted to the facility in the past twelve (12) months, whose length of stay was for thirty (30) days or more, who received comprehensive PREA information on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on the facility's policies and procedures for responding to such incidents. Comprehensive PREA education of all inmates is documented in the inmate's file and in the Jail Management System (JMS).

The facility provides inmate education in formats accessible to all inmates including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. Per agency policy, effective communication of PREA information, with the deaf or hard of hearing inmate would consist of staff providing information in writing and the exchange of written notes with the inmate. For the blind or visually impaired inmate, staff would read and discuss the PREA information with inmates. Staff also have access to Language Line Solutions Interpretation Service. All staff interviewed were able to describe how they would access Language Line if needed. Staff also can access the following:

Interpretation Services:

- Idaho Council for the Deaf and Hard of Hearing may be referenced and/or contacted for a list of qualified interpreters.
- Purple Video Relay Services has been installed in conjunction with our inmate communications system to provide interpretation services.

TTY and Relay Services:

- TY Services (also known as telecommunications device for deaf people, or TDD) is a feature provided by our inmate communications system. We also have our own TTY device in the event our inmate communications system malfunctions.
- The facility maintains PREA educational materials in multiple languages. For those inmates with mental health issues, the facility has a Mental Health Contractor who would review the PREA information with the inmate.

Per policy 2.6, *"The Inmate Handbook, PREA Pamphlet, and the posters in the housing units will be continuously and readily available or visible."* During the facility tour of the medical unit, the Auditor observed a monitoring screen playing a PowerPoint PREA presentation for inmates awaiting medical services. This presentation displayed information on sexual assault awareness and the facility's policies in English and in Spanish. The Auditor observed PREA information in the housing units during the facility tour. This information consisted of the following:

- The facility's Zero-Tolerance Policy

- Sexual Assault Awareness poster in English and Spanish
- Jail Rape Reporting Hotline
- Rape Crisis Center contact information
- Pocatello Police contact information

During the facility tour, the Auditor was able to randomly speak with inmates regarding the PREA information they received at the time of intake. The majority of the inmates reported being provided with extensive PREA information and having to watch a video on PREA. Additionally, inmates reported receiving comprehensive PREA education multiple times by staff in their housing unit. Inmates reported being provided with PREA brochures upon booking. Several inmates informed the Auditor multiple ways in which in which they could report abuse if they needed to and where they could locate telephone numbers to make the call. One (1) inmate was Spanish-speaking and reported he did not receive PREA information or PREA paperwork in Spanish.

Corrective Action Plan - The Sexual Abuse Awareness poster was not readily available in both English and Spanish. Additionally, the facility was requested to provide the Spanish-speaking inmate with all English written PREA information that was previously provided in Spanish. The facility provided proof to the Auditor that the Spanish-speaking inmate was provided all PREA information in Spanish and photos of the posters in the housing units in Spanish.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Training Records • National Institute of Corrections (NIC) Training Certificates • Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Detention Investigators • Sheriff's Detective

Bannock County Detention Center Policy 10.4 states that all investigators will receive specialized training three (3) hours of online PREA training: titled “Investigating Sexual Abuse in a Confinement Setting” through the National Institute of Corrections (NIC). Per policy, this training will be completed by all investigator prior to them completing any investigation of sexual abuse or sexual harassment of inmates and further, this training shall be documented. The Auditor reviewed the training records of eleven (11) staff regarding this standard. Eight (8) facility investigators, two (2) Sheriff Department Detectives and the Detention Captain/PREA Coordinator completed the training and the certificates through the NIC are maintained in the training records. Interviews with facility investigators, the Detention Captain/PREA Coordinator and a Sheriff’s Detective confirm they received specialized training prior to conducting any sexual abuse/harassment investigation.

The main purpose of the course through the NIC is to assist agencies in meeting the requirements of the Prison Rape Elimination Act (PREA). At the end of the course, investigators will be able to explain the knowledge, components, and considerations that an investigator must use to perform sexual abuse or sexual harassment investigations consistent with the PREA standards. The specialized training also includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, the criteria and evidence required to substantiate a case for administrative action or prosecution referral.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.1, Sexual Misconduct, General Provisions • Staff Training Records <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Medical Staff • Mental Health Staff <p>Bannock County Detention Center Policy 10.1 states all full and part-time medical and mental health care practitioners who work regularly in the BCDC shall receive</p>

specialized training in 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.
- How and who to report allegations of suspicions of sexual abuse and sexual harassment.

The facility contracts with Ivy Medical for on-site medical services and mental health services. Medical services are provided twenty-four (24) hours per day, seven (7) days per week. Mental health services are provided to the inmates four (days) per week, Monday through Thursday. The facility does not conduct forensic medical exams. As such, victims would be transported to the local hospital for forensic examination with a Sexual Assault Forensic Examination (SAFE) or Sexual Assault Nurse Examination (SANE). These examinations and any emergency medical care would occur at the Portneuf Medical Center. Per the training records, the PAQ and the Detention Captain/PREA Coordinator, there are twenty-three (23) medical and mental health care practitioners who work regularly at the facility who received the training required by agency policy. All medical and mental health care staff have received the same PREA training as mandated for employees.

All medical and mental health care staff assigned to the facility have additionally completed Specialized Training through the National Institute of Corrections (NIC). A review of training certificates through the NIC shows that the medical and mental health care staff have completed this additional training. The facility maintains documentation that all medical and mental health practitioners who work at the facility have received both the training as mandated for employees and the specialized training as listed above.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents Reviewed: Pre-Audit Questionnaire (PAQ) Inmate Intake Listing Policy 5.2, Classification, Primary Classification Interviews Conducted:

Detention Captain/PREA Coordinator
Classification/Booking Deputies
Detention Staff
Random and Targeted Inmates

BCDC Policy 5.2 requires screening (upon admission to the facility or transfer from another facility) for risk of sexual abuse victimization or sexual abusiveness toward other inmates. At the time of intake, the Classification/Booking Deputy will complete the risk assessments of all inmates being admitted for the risk of being sexually abused by other inmates or sexually abusive towards other inmates. The policy requires that inmates be screened for risk of sexual victimization or risk of sexually abusing other inmates within seventy-two (72) hours of their intake. There were one thousand two hundred sixty-seven (1267) inmates admitted or transferred to the facility in the past twelve (12) months whose length of stay in the facility was for seventy-two (72) hours or more and who were screened for risk of victimization or risk of sexually abusing other inmates.

The facility utilizes an objective risk screening instrument. The intake screening considers at a minimum the following:

1. Whether the inmate has a mental, physical, or developmental disability.
2. The age of the inmate.
3. The physical build of the inmate.
4. Whether the inmate has previously been incarcerated.
5. Whether the inmate's criminal history is exclusively nonviolent.
Whether the inmate has prior convictions.
6. Whether the inmate is or is perceived to be gay, bisexual, lesbian, transgender, intersex, or gender non-conforming.
7. Whether the inmate has previously experienced sexual victimization.
8. The inmate's own perception of vulnerability.
9. Whether the inmate is detained solely for civil immigration purposes.

At the time of intake, and during the booking process, the Classification/Booking Deputy conducts the risk assessments on the inmate in the "PREA" room where the inmate is afforded privacy during the assessment process. The Classification/Booking Deputy stated during their interview that the risk assessments will not be completed on an inmate who is under the influence or intoxicated but will be conducted within seventy-two (72) hours of their admittance. Per policy 5.2, when assessing the inmates for risk of being sexually abusive, the initial risk screenings consider prior convictions for violent offenses, and history of prior institutional violence or sexual abuse as known to the agency.

Policy 5.2 requires the facility to reassess each inmate's risk of victimization or abusiveness not to exceed thirty (30) days of the inmate's intake, based on any relevant information received by the facility since the initial risk screening. There were five hundred ninety-five (595) inmates during the past twelve (12) months whose length of stay at the facility for thirty (30) days or more who were reassessed

for their risk of sexual victimization or of being sexually abusive. The Classification/Booking Deputy will complete the reassessment within thirty (30) days of the inmate's intake and upon receiving additional information that warrants a reassessment due to a referral, request, incident of sexual abuse, or receipt of additional information that impacts the inmate's risk of sexual victimization or abusiveness.

Per policy 5.2 inmates will not be disciplined for refusing to answer or for not disclosing complete information related to the assessments questions, specifically regarding their perception of their sexual status, if they have a mental, physical, or developmental disability or their own perception of vulnerability. Inmates who were interviewed reported their understanding they would not be disciplined for refusing to answer any of the questions contained in the assessment. They also reported remembering staff asking them how they identify, and some of the inmates recalled receiving a subsequent reassessment. Each inmate interviewed reported the questions were asked of them privately while in the "PREA" room.

Following completion of the risk assessments, the paper documents are secured in locked cabinets in an office in the Booking area of the facility and the information obtained from the assessments, including the outcomes, are stored in the Jail Management System and access to this information is limited only to facility supervisors, classification/booking staff, medical and mental health staff, and investigators.

Interviews with Booking/Classification Deputies and a review of inmate files revealed that some inmates did not receive a reassessment for the inmate's risk of victimization or abusiveness within the inmate's thirty (30) days of intake. Although it is written in policy that every inmate is reassessed, the Auditor could not locate reassessments for several inmates during the review of inmate files. The Auditor also found that the Classification/Booking Deputies were not utilizing the objective screening tool and were conducting subjective assessments.

Corrective Action Plan:

During the on-site exit meeting, the Auditor discussed a Corrective Action Plan with the Detention Captain/PREA Coordinator. The Detention Captain/PREA Coordinator modified the facility's current risk assessments to ensure staff were performing objective screening tools. This new process was reviewed with the Auditor to ensure compliance with the PREA Standards. The Detention Captain/PREA Coordinator then retrained all Classification/Booking Staff and reassessed all inmates. Proof of curriculum, training rosters and twenty-six (26) inmate reassessments were provided to the Auditor. The Auditor found the facility was able to come into compliance with these updated changes and training.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.42 Use of screening information

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 5.2, Classification, Primary Classification
- Policy 2.1, Admissions, Intake

Interviews Conducted:

- Booking/Classification Deputies
- Detention Captain/PREA Coordinator
- Detention Staff

The BCDC utilizes information gathered from the PREA risk assessments to determine housing, bed, work, education, and program assignments with the goal of keeping inmates of being sexually victimized separate from those inmates at risk of being sexually abusive.

The facility uses a computerized program in the assessment process to classify the inmate as a low, medium, or high risk. These results prevent potential abusers from being housed with those at risk of victimization. The Classification/Booking Deputy completes the PREA assessment in the Booking screen of the Jail Management System of all inmates being admitted to the facility per Policy 5.2. These assessments are individualized to ensure the safety of each inmate.

Male and female inmates will ordinarily be housed separately, per policy. When there are questions regarding gender, (i.e., transgender, intersex, gender surgery, hormone therapy, etc.), the inmate classification will be determined on a case-by-case basis and in accordance with Policy 2.1. In deciding whether to house transgendered or intersex inmates in a male or female housing unit the Classification/Booking Deputy will consider on a case-by-case basis to ensure the inmate’s health and safety and whether the placement will present management or security problems. During an interview with Booking staff, intersex or transgender inmates can be placed in the “bubble” of a housing unit, where the inmate is afforded a single cell. This area is a separate area within the housing unit, maintains line of sight supervision, and has separate showers from the rest of the unit. Additionally, a transgender or intersex inmate’s own view with respect to their safety is given serious consideration with respect to housing. Per the Detention Captain/PREA Coordinator, the process of housing decisions is interactive, can vary on the inmate and depends on who they feel they can be housed with.

Per policy, *“Placement and programming assignments for each transgendered or intersex inmate shall be reassessed at least twice each year to review any threats to*

	<p><i>safety experienced by the inmate.”</i> Once this reassessment is completed, the Booking Deputy will enter this information in the Jail Management System. The facility provided and the Auditor reviewed documentation of risk-based housing decisions conducted in the past twelve (12) months. Additionally, the Auditor reviewed the screening assessments and reassessments of twenty-six (26) inmates which were conducted in accordance with facility policy.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Policy 5.2 Classification, Primary Classification <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator <p>Bannock County Detention Center Policy 5.2 prohibits inmates at high risk of sexual perpetration from being placed on restricted housing unless an assessment of all available alternatives has been made to determine that there is no available alternative means of separation from likely abusers. The policy states, <i>“If such an assessment cannot immediately be conducted, the inmate may be placed on involuntary restricted housing for less than twenty-four (24) hours while the assessment is being completed.”</i> Inmates placed on restricted housing shall only happen until an alternative means of separation from likely abusers can be arranged. This assignment shall not normally exceed thirty (30) days. Inmates placed on restricted housing shall have all access to programs, privileges, education, and work opportunities to the extent possible. There have been no inmates held in involuntary segregated housing who were at risk of sexual victimization in the past twelve (12) months.</p> <p>The restricted housing of an inmate would be documented by the facility in the inmate’s log by generating a PREA Restricted Housing (PRH) event in the Jail Management System and including the following information:</p> <p>A. If opportunities are restricted, the Classification/Booking Deputy shall document:</p> <ol style="list-style-type: none"> 1. Which opportunities have been limited.

	<ol style="list-style-type: none"> 2. The duration of the limitation. 3. The reasons for such limitations. <p>B. If a restricted housing assignment is made, the Classification/Booking Deputy shall document:</p> <ol style="list-style-type: none"> 1. The basis for their concern for the inmate's safety. 2. The reason why no alternative means of separation can be arranged. <p>Per policy, if a restricted housing assignment exceeds thirty (30) days, the Classification/Booking Deputy shall conduct a review every thirty (30) days to determine whether there is a continuing need for such separation from the general population. The Detention Captain/PREA Coordinator stated an inmate at high risk for victimization or who has alleged sexual abuse would likely be placed in the booking area to protect them only until an alternative housing arrangement could be made which will be addressed fairly quickly. He further stated they would move the threatening inmate to a housing unit away from the victim, but they would not be segregated.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.2, Sexual Misconduct, Reporting • Policy 5.2, Classification, Primary Classification • Policy 10.3, Sexual Misconduct Policy Operations • Policy 10.1, Sexual Misconduct, Policy General Provisions • PREA Training for Staff • PREA Education and Video for Inmates • PREA Pamphlet • PREA Posters • Inmate Handbook • Comprehensive PREA Information during Unannounced PREA Rounds • PREA PowerPoint in the Medical Unit • Staff PREA Training • PREA Compliance Memo to All Bannock County Staff

- Bannock County Website
- Idaho Jail Standards

Interviews Conducted:

- Random Inmates
- Random Staff

Bannock County Detention Center provides multiple internal ways for inmates to report privately about sexual abuse or sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, staff neglect or violation of responsibilities that may have contributed to such incidents. Per Policy 10.2, these procedures will help inmates feel safe about reporting sexual assault or sexual activity and staff will encourage victims to report instances of rape, sexual assault, and sexual activity. Inmates may make reports either verbally or in writing; privately or anonymously, or via third party. The following avenues to report abuse include the following:

1. The inmate may report by telling staff.
2. The inmate may notify someone outside of the facility who will contact the BCDC Administration or medical staff.
3. The inmate may call or have someone else call the BCDC Rape Reporting Line utilizing the speed dial function on the inmate phones.
4. The inmate may call the Pocatello Police Department.
5. Staff will be allowed to privately report sexual abuse/harassment to an administrator.
6. An inmate request slip.
7. Send a personal letter.
8. Personal letter addressed to administration or staff.
9. Third party.

Inmates detained solely for civil immigration will be provided mailing addresses and telephone numbers of immigrant service agencies. Per the Detention Captain/PREA Coordinator, the facility does not house inmates solely for the purpose of civil immigration.

Inmates are provided a copy of the PREA Pamphlet at the time of intake which contains the following information:

"Duty to Report

If you are experiencing pressure from or have been sexually abused by an inmate, Bannock County Sheriff staff member, volunteer, or contractor, please report this abuse immediately. Reports may be made (but not limited) to the following:

- *Any staff member, volunteer, or contractor.*

- *Someone outside of the facility.*
- *Medical staff.*
- *Jail Rape Reporting Hotline*
- *Pocatello Police @234-6100."*

The Inmate Handbook, the PREA video, PREA posters located throughout the facility, the PREA PowerPoint in the medical unit, and the unannounced PREA rounds all contain information to inmates on the multiple methods they can internally and externally report sexual abuse or sexual harassment. The Auditor spoke with several inmates during the audit tour, and they were able to explain how they would make a report of abuse. Inmates also shared how they could find telephone numbers if they wanted to make a report of abuse outside of the facility. The Auditor observed this information as contained in PREA posters in the housing units of the facility. Inmates have access to working telephones and writing materials in their housing unit as confirmed by the Auditor. Calls to the reporting hotlines are free.

A memo to all staff regarding PREA compliance for Bannock County, establishes that the Bannock County Sheriff's office will list on their website, and in their jail information, that the Bannock County Sheriff's Department will be the outside agency to accept reports of abuse. Reports of abuse that are received through Dispatch, will initiate a call for an "Agency Assist," and be assigned to a Detective if they are on duty, or if they are not on duty, assigned to a Detention Deputy, to obtain/document the initial call information and make the report to Bannock County Detention Center. The Detective or Deputy's role upon receiving the report will be to contact the reporting party and gather sufficient information so that an investigator from the appropriate jurisdiction can follow up.

The facility has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. Staff reported they are required to and would accept reports of sexual abuse/harassment made verbally, in writing, anonymously, and from third parties and they would document these reports in the Jail Management System and would do so immediately which is in accordance with Policy 10.2. Policy 10.2 states all staff are required to accept all reports from an inmate or third party without hesitation, delay, or question and promptly forward them to the Shift Supervisor or Detention Administrator. This policy also establishes procedures for staff to privately report sexual abuse/harassment of inmates. Staff reported during interviews that they could make a private report by speaking privately with a supervisor, by making a private phone call, or by submitting a note or email to an administrator. This requirement is also explained in the staff training materials as reviewed by the Auditor.

At the time of intake, inmates are provided with PREA information by the Classification/Booking Deputy. They are required to watch a PREA video and are provided with the PREA Pamphlet, and the Inmate Handbook which includes information on how to make a report of abuse. Inmates can discuss the reporting process with staff and are required to sign a form that they understand the information they received. A Classification/Booking Deputy conducted a mock intake

	<p>for the Auditor on this process which was also confirmed during interviews with inmates.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.2, Sexual Misconduct, Reporting • Policy 7.14, Operations, Inmate Grievances • Idaho Jail Standards <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator <p>The BCDC has a policy for dealing with inmate grievances regarding sexual abuse. Policy 7.14 states <i>“The inmate grievance procedure is an internal administrative means for resolving complaints and identifying potentially problematic management areas. It is designed to supplement, but not replace, the informal communication process between inmates and staff.”</i> If an inmate submits a grievance form regarding sexual abuse, it will be accepted and immediately given to the Shift Supervisor and withdrawn from the routine grievance process. Said grievance will be considered a complaint, not a formal grievance, and not subject to any of the rules, procedures, timelines, or administrative procedures regarding the formal grievance process.</p> <p>The facility policy allows the inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred. This policy does not require the inmate to use an informal process, or attempt to resolve with staff, an incident of alleged abuse. The facility’s policy also allows the inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. Additionally, the facility’s policy requires that an inmate grievance not be referred to the staff member who is the subject of the complaint.</p> <p>The Idaho Jail Standards requires the facility have a written grievance procedure which includes the following provisions:</p>

1. Any inmate has the right to file a grievance.
2. The facility administrator or their designee promptly investigates and responds to all grievances, providing reasons for the decisions. Responses to grievances shall be within a prescribed, reasonable time period, with special provisions for responding to emergencies.
3. Inmates reporting a grievance are not subjected to reprisal.
4. Inmates are provided with at least one level of appeal.

Policy 10.2 states that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse must be made within ninety (90) days of the filing of the grievance. There were no grievances filed alleging sexual abuse in the past twelve (12) months.

Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. If a third-party file 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 personally pursue any subsequent steps in the administrative process. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision in the inmates' permanent file. There were no grievances filed by inmates in the past twelve (12) months in which the inmate declined third-party assistance.

Bannock County Policy 7.14 states inmates may file an emergency grievance alleging that they were subject to a substantial risk of imminent sexual abuse. An emergency grievance shall be immediately forwarded to a level at which immediate corrective action may be taken. The initial response and final decision documents the determination as to whether the inmate is at substantial risk of imminent sexual abuse and the action taken. The facility policy requires an initial response to an emergency grievance regarding alleged sexual abuse within forty-eight (48) hours and that a final agency decision be issued within five (5) days. There were no emergency grievances alleging substantial risk of imminent sexual abuse filed in the past twelve (12) months.

An inmate may be disciplined for filing a grievance alleging sexual abuse only where it can be demonstrated that the inmate filed the grievance in bad faith. There were no inmate grievances that resulted in disciplinary action by the agency against an inmate for having filed a grievance in bad faith in the past twelve (12) months.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 10.3, Sexual Misconduct, Operations
- Policy 5.2, Classification, Primary Classification
- PREA Pamphlet
- PREA Posters

Interviews Conducted:

- Random and Targeted Inmates
- Detention Staff

The facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by providing the inmate with the mailing address and telephone number to the Family Services Alliance of Southeast Idaho. This information is provided to the inmate at the time of intake via the PREA pamphlet. Per Policy 10.3, the facility will ensure the following:

1. Enabling reasonable communication between inmates and this organization in as confidential a manner as possible.
2. Inmates detained who are also illegal immigrants will be provided mailing addresses and telephone numbers of immigrant service agencies.
3. Said telephone calls will be provided free of charge to the inmate.
4. Prior to giving the inmate access, the Supervisor will advise the inmate of the following:
 - That these communications will not be monitored.
 - That information may be relayed from the victim advocate in order to initiate and conduct an investigation into the sexual abuse in accordance with mandatory reporting laws.

The facility maintains a Memorandum of Understanding (MOU) with the Family Services Alliance (FSA) of Southeast Idaho in Pocatello, Idaho. The FSA provides inmates with emotional support services related to sexual abuse which also includes the following: advocacy with court proceedings, law enforcement, and other social service agencies, accompaniment to forensic medical examinations, medical advocacy, information and referrals, and ongoing mental health counseling if requested by the victim. The facility maintains copies of the MOU with the FSA.

The facility posts information on the Family Services Alliance of Southeast Idaho including the services offered, the telephone number and address on posters in each housing unit and contained in the PREA Brochure. Inmates are able to send confidential mail to the FSA and their mail will not be read by staff. Writing materials will be provided to the inmates and calls to the FSA are at no cost. Inmates are also

	<p>informed of these services at the time of intake and subsequently twice per month during the unannounced PREA rounds. Inmates reported an understanding of the services available to them through the FSA if they needed them and reported where they would locate the number to contact them. Staff were equally knowledgeable about where the inmates could receive outside confidential support services.</p> <p>Based upon the review of agency policies and procedures, All PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.54	Third-party reporting
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • PREA Compliance Memo to Bannock County Staff • Bannock County Website <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Inmates • Detention Staff <p>The BCDC provides information for third-party reports of abuse on the agency’s public website. The website states the following regarding reporting abuse:</p> <p><i>“If you suspect sexual abuse or sexual harassment has happened at the Bannock County Detention Center, you may call the Jail Administrator at 208-236-7130, or you may call a Detention Supervisor at 208-236-7125, or you may call the Pocatello Police Department at 208-234-6100. Please have any information or evidence available for the investigator who will be assigned to handle the case. False accusations may be prosecuted. All reports are taken seriously and investigated as outlined in PREA.”</i></p> <p>A memo to all Bannock County Detention Center staff describes and outlines the process for third-party reports of inmate abuse and includes the investigation process that will follow receipt of that call. Interviews with staff and inmates alike indicate their awareness that the facility will accept and act upon third-party reports.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>

115.61	Staff and agency reporting duties
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 10.2, Sexual Misconduct, Reporting
- Training Curriculum

Interviews Conducted:

- Random and Specialized Staff
- Medical and Mental Health Staff
- Detention Captain/PREA Coordinator

The PAQ stated that the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. Policy 10.2 states all employees, contractors, and volunteers are responsible for detection and reporting of sexual abuse and sexual harassment. *“Staff are required to accept all reports from an inmate or third-party without hesitation, delay, or questions and promptly forward them to the shift supervisor or detention administration.”* This also includes any information or knowledge of retaliation or staff neglect or violation the agency’s PREA Policies.

Interviews with random staff confirm that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse and/or sexual harassment and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff stated that they would immediately report the information to their supervisor and begin filling out the First Responder Checklist to ensure the safety of the victim and in accordance with facility policy and procedure. If the alleged victim is considered a vulnerable adult, staff reported they would additionally report to the State of Idaho Adult Protective Services.

The PAQ indicated that apart from reporting to designated supervisors, designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than the extent necessary to make treatment, investigation and other security and management decisions. Policy 10.2 states, *“Detention personnel will treat all information regarding a sexual assault and sexual activity with confidentiality. Detention personnel will only share information regarding a rape, sexual assault, and sexual activity with those persons who need to know for decision making, investigation, and prosecution. Detention personnel will remain from talking openly about such issues. Detention personnel shall immediately address inappropriate comments such as taunting or teasing.”* Detention staff reported during interviews, this information would be only shared with supervisors or only those with a *“need or right to know.”*

Unless precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse and to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services. Medical and mental health care staff are able to maintain confidentiality regarding care and condition of the patient. However, they must immediately report to the Detention Captain any acts of violence or reports of sexual activity between patients or with staff.

Medical and mental health staff are required to inform patients at the initiation of services of their duty to report, and the limitations of confidentiality, unless otherwise precluded by Federal, State, or local law. There were zero (0) allegations of sexual abuse or sexual harassment reported to a medical or mental health staff in the last twelve (12) months. Interviews with medical and mental health care staff confirm that at the initiation of services with an inmate they disclose their limitation of confidentiality and their duty to report and have the inmate sign a document that states they received this information.

When interviewed, detention staff and medical and mental health staff were able to clearly articulate their duties for to report any knowledge, suspicion, or information regarding an incident of sexual abuse and/or sexual harassment and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Detention staff and medical and mental health contractors all stated that they would immediately report the information to their supervisor or Detention Captain who in turn, would assign to facility investigators to begin the investigation process.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.2, Sexual Misconduct, Reporting • Incident Review 896 • First Responder's Checklist <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Random and Specialized Staff • Random Inmates • Detention Captain/Detention Captain/PREA Coordinator

When the facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, the staff take immediate action to protect the inmate. Policy 10.2 states, *“All Bannock County Detention Center Staff (employees, volunteers, and contractors) are responsible for the detection and reporting of rape and sexual activity, or the suspicion of rape and sexual activity and all staff are required to accept all reports, as listed above, from an inmate or third party without hesitation, delay, or question, and promptly forward them on to the Shift Supervisor or Detention Administration.”* *“If rape, sexual assault, or sexual activity are suspected or reported, (whether reported verbally, in writing, anonymously or via third party), Detention Staff will immediately notify the Shift Supervisor and/or Detention Administration.”*

When interviewed, staff were able to articulate the steps they would take to assist an inmate if they were to learn that an inmate was subject to a substantial risk of imminent sexual abuse. Staff stated they would act immediately to separate the inmate from the alleged perpetrator(s) and keep inmates safe while the facility investigated the situation. Staff would place the inmate in another room or pod, provide them with enhanced supervision, and begin crisis intervention. Limited information would be documented in the Jail Management System (JMS) while detailed information would be documented but in a restricted area of the JMS where only those who have a need to know have access. In the last twelve (12) months, there was one (1) incident where an inmate was reported to be at a substantial risk of sexual abuse.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.2, Sexual Misconduct, Reporting, Reporting to Other Confinement Facilities • Incident Reports <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/Detention Captain/PREA Coordinator • Facility Investigators

	<p>Facility Policy 10.2 requires all staff to immediately report an allegation of an inmate that was sexually abused at another facility to the Detention Captain or designee. The Policy states, <i>“If a staff member receives an allegation that an inmate was sexually abused while confined at another facility, he shall notify the Detention Captain.”</i> The Detention Captain will notify the agency where the incident allegedly occurred. Notifications to other facilities will take place within seventy-two (72) hours. However, when interviewed, the Detention Captain/Detention Captain/PREA Coordinator stated these types of notifications happen immediately. Per the PAQ, there were two (2) incidents in the last twelve (12) months in which an inmate reported sexual abuse at a prior facility, Incident Reviews (IR) #875 and #887. A review of these IRs found the alleged incidents were reported to the assigned facility commander immediately. Documentation is uploaded to the facility’s Jail Management System (JMS) which was reviewed by the Auditor.</p> <p>The Detention Captain/Detention Captain/PREA Coordinator will ensure that all allegations of sexual misconduct are investigated in accordance with the PREA standards. Based on the Information provided in the PAQ, there were two (2) allegations of sexual abuse alleged by inmates formerly assigned to the Bannock Detention Center. These allegations were assigned to the investigation’s unit and the investigative findings were reported back to the referring agency.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Exceeds Standard</p> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Investigator’s Checklist • Policy 10.2, Sexual Misconduct, Reporting, Reporting to Other Confinement Facilities • Policy 10.3, Sexual Misconduct, Operations <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/Detention Captain/PREA Coordinator • Investigation Staff • Medical Staff • Mental Health Staff • Random Staff

- First Responder Staff

The facility has a First Responder Policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report must separate the alleged victim and abuser and preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. If the abuse occurred within a time period that allows for the collection of physical evidence, the first security staff member to respond shall request that the alleged victim and alleged suspect do not take any actions that could destroy physical evidence.

In the past twelve (12) months, the facility indicated in the PAQ that there were nine (9) allegations of sexual abuse. However, after further review, there were only three (3) reported allegations of alleged sexual abuse and three (3) reported allegations of alleged sexual harassment. Policy 10.2, Sexual Misconduct, Reporting, states,

“Secure the victim alone in a cell to preserve evidence. If possible, turn the water off (although it is natural for the victim to want to clean up, the victim should not shower or wash, brush teeth, change clothes, urinate, defecate, smoke, eat, or drink until after evidence is collected). Secure the alleged perpetrator alone in a cell to preserve evidence (if possible, turn off the water and follow the same steps listed above for the victim). If the medical unit orders the victim transported to a hospital, notify the hospital that the victim coming in is a rape victim and request the hospital SART (Sexual Abuse Response Team) be activated if possible.

In addition to these first responder duties, staff would initiate the facility’s First Responder Checklist which describes first responder duties for initial responders and Supervisory Staff in a clear and concise manner. Medical Staff would be contacted to evaluate the victim and determine if the victim would need to be transported to the local hospital for a SAFE/SANE exam. Victims are not required to receive this exam but are encouraged to do so. All staff, both random and specialized, were extremely well-informed and trained, and were able to clearly articulate their duties as first responders when interviewed.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **EXCEEDS** this standard.

115.65	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Policy 10.2, Sexual Misconduct, Reporting, Reporting to Other Confinement Facilities
- First Responder Checklist
- Supervisor Checklist
- Investigator Checklist
- Coordinated Response

Interviews Conducted:

- Random Staff
- Facility Investigators
- Detention Supervisors
- Detention Captain/PREA Coordinator
- Family Services Alliance of Southeast Idaho

The facility has developed a written institutional plan to coordinate actions taken to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and facility leadership. Policy 10.3 outlines in concise detail the duties to take after a reported sexual abuse allegation. The document includes duties and a Checklist for the First Responders, Shift Supervisors, Medical and Mental Health, Detention Captain/PREA Coordinator, and Investigators. The duties for each of these responders provide detailed information regarding evidence collection protocols, investigative and record keeping directions, medical and mental health duties, and duties of the Detention Captain/PREA Coordinator. Interviews with the staff, Supervisors, Investigators, and the Detention Captain/PREA Coordinator confirmed these checklists were utilized, and that the facility has a written plan to coordinate actions among first responders, medical, mental health, investigators, and facility leadership. When interviewed, all staff were extremely familiar with the procedures outlined in this coordinated response. Each pod in the facility has the checklist where staff can easily access it and all staff were able to articulate its location and the information contained in the checklist. In addition, the Family Services Alliance (FSA) of Southeast Idaho would be contacted to provide victim advocacy services to the inmate. The FSA will meet the inmate at the hospital and stay with them during the forensic exam.

Based on a review of this plan, and the staff's knowledge of their duties in the event of a sexual abuse or sexual harassment incident, the facility **EXCEEDS** this standard.

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <hr/> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator <p>Bannock County Detention Center does not participate in any collective bargaining agreements. Therefore, there are no collective bargaining related limitations of the agency’s ability to remove alleged staff sexual abusers from contact with any offender pending the outcome of an investigation or to determine to what extent discipline is warranted. Should the BCDC enter into a bargaining agreement, restriction would be imposed that would not limit the agency from removing alleged staff sexual abusers from contact with residents pending the outcome of an investigation and not disciplining employees up to and including termination. Interviews with the Detention Captain/PREA Coordinator confirmed this statement.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Training Records • PREA Retaliation Monitoring Report • Incident Reports • Sexual Abuse Retaliation Monitoring Log • Policy 10.4, Investigation/Discipline/Incident Review <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Lieutenants • Retaliation Monitor (Detention Captain/PREA Coordinator) • Inmates Who Reported Sexual Abuse • Staff

- Inmates

Policy 10.4 outlines the facility's standards to protect all inmates and staff who report sexual abuse and sexual harassment or who cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. Policy 10.4, Retaliation, states, *"All staff members will protect 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. Such protection shall be afforded via housing changes to separate victims and abusers, removal of alleged staff members from contact with victims, and emotional support services for inmates or staff members who fear retaliation."*

The Detention Captain/PREA Coordinator is responsible for monitoring retaliation that may take place in the facility. Retaliation monitoring begins when a report of sexual abuse or sexual harassment is reported and will continue for at least ninety (90) days and may continue longer until there is no indication of a continued need, or the inmate is no longer at the facility. Inmate retaliation monitoring will include, but is not limited to, a review of inmate housing changes, disciplinary reports, and program changes. Staff retaliation monitoring includes but is not limited to staff reassignments and job performance behavioral changes. Per Policy 10.4, *"If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation."*

The facility provides multiple protective measures including, but not limited to, housing changes or transfers of inmate victims or inmate abusers from contact with victims. The facility also provides emotional support services for inmates or staff members who fear retaliation for reporting sexual harassment/abuse or for cooperating with an investigation.

Interviews with the Detention Captain/PREA Coordinator indicated that protective measures would be taken if an inmate or staff member expressed fear of retaliation. The Detention Captain/PREA Coordinator stated that the facility has a stringent Zero-Tolerance Policy, and that staff are constantly trained on the PREA Standards. Retaliation monitoring tools utilized would be a review of video, phone calls, disciplinary records written by staff and emails. Retaliation monitoring for staff includes a review of staff disciplinary reports, staff attendance, video monitoring, and any overall change in the individual. The Detention Captain/PREA Coordinator stated that if there was a conflict, they would take appropriate action such as housing changes, transfers, and removal of the alleged staff abuser from contact with the inmate. Monitoring for inmates and staff consist of face-to-face contact on a weekly basis if not more, depending on the situation.

All PREA incidents are reviewed by the Incident Review Team which consists of a Sergeant, Medical Staff, Corporals, and an Investigator. These reviews are conducted within thirty (30) days of the allegation. During these reviews, the team determines what changes need to be made, if any, to protect the inmates and staff. The Incident Review Team reviews, but is not limit to the following:

	<ul style="list-style-type: none"> • Reviewing whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTQ community gang affiliation and/or other group dynamics at the facility? • Reviewing the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. • Reviewing the adequacy of staffing levels in that area during different shifts? • Reviewing whether monitoring technology should be deployed or augmented to supplement supervision by staff? <p>There were zero (0) incidents of retaliation reported or observed in the last twelve (12) months.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 5.2, Classification, Primary classification • Policy 6.6, Special Needs, Restrictive Housing <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Intake and Booking Staff • Random and Targeted Inmates <p>As reviewed during the facility walkthrough and interviews with staff and inmates, the facility does not have a segregated housing unit and as such, this provision does not apply. The facility does, however, have a policy prohibiting the placement of inmates who allege to have suffered sexual abuse in involuntary restricted housing unless an assessment of all available alternatives has been made and a determination has been made that there is no alternative means of separation from likely abusers. Policy 5.2, Classification, Primary Classification, states, <i>“Inmates at high risk of sexual victimization or sexual perpetration shall not be placed on restricted housing unless an assessment of all available alternatives has been made and it has been determined that there is no available alternative means of separation from likely</i></p>

abusers.” If such assessment cannot immediately be conducted the inmate may be placed on involuntary restricted housing for less than twenty-four (24) hours while the assessment is being completed. Inmates placed on restricted housing shall only happen until an alternative means of separation from likely abusers can be arranged. Such assignment shall not ordinarily exceed thirty (30) days. The policy further states *“Those inmates placed on restricted housing shall have access to programs, privileges, education, and work opportunities to the extent possible.”* If a restrictive housing change is necessary, such actions must be documented in detail, and address the following questions:

- Which opportunities have been limited.
- The duration of the limitation.
- The reasons for such limitations.
- The basis for their concern for the inmate’s safety.
- The reason why no alternative means of separation can be arranged.

If the facility cannot conduct an assessment immediately, they will hold the inmate in restrictive housing for less than twenty-four (24) hours while completing the assessment. The PAQ indicated that zero (0) inmates who alleged sexual abuse were involuntarily segregated for zero (0) to twenty-four (24) hours or longer than thirty (30) days. The Detention Captain/PREA Coordinator confirmed the agency’s policy; and that the facility does not have a segregated housing unit. The Auditor confirmed during the tour that the facility does not have a segregated housing unit.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.4, Sexual Misconduct, Investigation/Discipline/ Incident Review • Review of the National Institute of Corrections (NIC) online course, “Investigating Sexual Abuse in a Confinement Setting” • Investigator Training Records • Investigation Checklist • Sample of Incident Reports <p>Interviews Conducted:</p>

- Criminal and Administrative Investigation Staff
- Detention Captain/PREA Coordinator

The Bannock County Detention Center (BCDC) investigates promptly, thoroughly, and objectively when notified of an allegation of sexual abuse or sexual harassment, including third-party and anonymous reports. The Facility Investigators are responsible for conducting administrative investigations of all sexual abuse and sexual harassment allegations. The facility's policy on administrative and criminal investigations is outlined in Policy 10.4 which states, *"The Bannock County Detention Center will initiate either an administrative or criminal investigation as soon as possible after the report of sexual harassment or sexual assault of an inmate or staff member."* Furthermore, *"Allegations that involve potentially criminal behavior will be investigated by an agency with the legal authority to conduct criminal investigations. All investigators will be required to follow uniform evidence protocol, provide forensic medical examinations, and provide victim advocates when necessary."*

All investigators, both facility investigators and detectives, receive specialized training in sexual abuse investigations through the NIC. This training is listed on the PREA Resource Center's website as a qualified training for this standard. All training records reviewed found that all investigators had received this training and are therefore qualified to investigate sexual abuse and sexual harassment allegations as they pertain to the PREA Standards. These training techniques included, but were not limited to:

- Techniques for interviewing sexual abuse victims
- Proper use of Miranda and Garrity warnings
- Sexual abuse evidence collection in confinement settings

The criteria and evidence required to substantiate a case for administrative or prosecution referral The BCDC ensures administrative and criminal investigations are conducted on all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports. The policy requires administrative investigations to include efforts to determine whether staff actions or failure to act contributed to an act of sexual abuse. Investigative reports are required to include a description of physical evidence, testimonial evidence, the reason behind credibility assessments, and investigative facts and findings. The Auditor reviewed investigative reports for the six (6) allegations of sexual misconduct during the past twelve (12) months. All reports contained the required elements as dictated by the standard. All allegations reviewed by the Auditor were investigated promptly and thoroughly, regardless of the source of the allegation. The investigators also have a detailed checklist to refer to if needed so they can ensure they have reviewed all aspects of the investigation. If at any time during the investigation it appears the charges are criminal in nature, the investigation will be referred to a Sheriff's Detective if the allegation does not involve a detention staff. If the allegation involves a detention staff, the matter will be referred to a neighboring county which the facility refers to as *"Tri-County."*

The facility is required to maintain written investigative reports for as long as the

alleged abuser is incarcerated or employed by the BCDC, plus an additional five (5) years. Policy prohibits the termination of an investigation if an inmate is released, or a staff member is terminated or terminates employment. BCDC investigators are required to cooperate with outside investigators and attempt to remain informed about the progress of a sexual abuse investigation. When interviewed, both Facility Investigators and Detectives stated that if Tri-County investigated an allegation, they typically work together and share information.

At the time of the on-site audit, the facility employed and provided training records for eleven (11) staff members who have received specialized training to conduct sexual abuse investigations in confinement facilities. The Auditor was provided with training curricula and training certificates of designated investigators. The Auditor reviewed and verified that each of the facility investigators had proof of receiving the specialized training required by the standard. Each investigator had received specialized training to conduct sexual abuse investigations in confinement settings. Targeted interviews with two (2) Facility Investigators and two (2) Detectives verified they are available to respond immediately. The Auditor asked the Investigators to describe their process when conducting an investigation. All interviews with investigators provided the same information with slight variations, but all within the scope of the standard.

According to those interviewed, they would interview the victim, alleged perpetrator, inmate witnesses, and staff witnesses if applicable. They review the scene, preserve any evidence if necessary, and then begin looking at documents. They review criminal histories on all inmates involved, disciplinary history, incident reports, and classification actions. The investigator reviews video, telephone recordings, staff logs, and any other relevant items which could be considered evidence to determine their findings. They will notify the Detention Captain/PREA Coordinator of the investigation and their findings. If at any point during the investigation it is determined there could be potential criminal charges involving a staff, the investigation would stop, and Tri-County would be notified and requested to complete the investigation.

The Investigators stated the investigation begins immediately after receiving an allegation. All investigative files are maintained in the Detention Captain's office with very limited access. Investigative files are maintained for a minimum of five (5) years after the abuser has been released or a staff abuser is no longer employed. Inmates are never required to submit to a polygraph examination during sexual abuse investigations. The credibility of an alleged victim, suspect or witness is assessed on an individual and case-by-case basis and not by the person's status as an inmate or staff. If an allegation is reported anonymously, the investigation would be handled the same as any other investigation. The investigation would continue even if an inmate were released, or a staff member terminates employment during the investigation. The BCDC has had six (6) incidents that required investigation during the review period. The Auditor reviewed investigative reports for all six (6) allegations of sexual misconduct during the past twelve (12) months.

All information regarding this standard was located in the BCDC Policy 10.4 and during interviews with facility investigators and detectives. Interviews were held with

	<p>the Supervising Investigator, Facility Investigators, and a Sheriff’s Detective.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • PRE-Audit Questionnaire (PAQ) • Policy 10.4 Sexual Misconduct, Investigation/Discipline/ Incident Review • Incident Reports <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Investigative Staff <p>The PAQ indicated that the agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. Policy 10.4 states, <i>“For administrative investigations, the Bannock County Detention Investigator shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</i> There were zero (0) sexual abuse allegations reported and as such no investigations were available for review. Interviews with the investigators confirmed that the level of evidence required to substantiate an administrative investigation is a preponderance of evidence.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Incident Reports

- Policy 10.4 Sexual Misconduct, Investigation/Discipline/ Incident Review
- Sample of Checklist (Showing notification to inmate)

Interviews Conducted:

- Detention Captain/PREA Coordinator
- Investigation Staff
- Lieutenants
- Sergeants

The facility's Policy 10.4 requires that any inmate who reports an allegation they have suffered of sexual abuse, is informed verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. If the allegation was made against a staff, contractor, or volunteer, the facility will report to the inmate the following:

- The staff member, volunteer, or contractor is no longer posted within the inmate's unit.
- The staff member, volunteer, or contractor is no longer employed or allowed entrance into the facility.
- The staff member, volunteer, or contractor has been indicted on a charge related to sexual abuse within the facility.
- The staff member, volunteer, or contractor has been convicted on a charge related to sexual abuse within the facility.

When interviewed, the Detention Captain/PREA Coordinator stated the facility will inform the inmate of the outcome of the allegation. The facility has a standardized form that provides detailed information as to when the inmate was informed, information provided, date and time, and who informed the inmate. When reviewing the Incident Reports, the Auditor found that all allegations had this form in the file and that the inmates had been informed of the outcome of the investigation. There were six (6) criminal and/or administrative investigations alleged and completed in the last twelve (12) months, three (3) of which were alleged inmate-on-inmate sexual abuse. There were no reports of staff, contractor, or volunteer-on-inmate sexual abuse. Policy 10.4 states that if an outside agency conducts an investigation of sexual abuse or sexual harassment, the BCDC will inquire with that agency the outcome of their investigation so as to inform the inmate. In the last twelve (12) there were no incidents reported that would warrant an outside agency investigation.

Policy 10.4 states that all inmates who have reported sexual abuse by another inmate, the investigator or designee will inform the inmate whenever the abuser has been indicted or convicted on a charge related to sexual abuse within the facility. In addition, the obligation to conduct the notifications shall terminate if the inmate is released from custody. All allegations, their outcomes and notification, are documented. When interviewed, investigators and the Detention Captain/PREA Coordinator were able to articulate this documentation process. All documents are

	<p>maintained in the Detention Captain/PREA Coordinator's office behind a locked door and in a locked cabinet. Access is extremely limited to only those who have a need to know and are approved by the Detention Captain/PREA Coordinator. In the past twelve (12) months, there were three (3) allegations of sexual abuse; all of which were documented. A review of these records was reviewed by the Auditor and found to be in compliance with this standard. When interviewed, the Detention Captain/PREA Coordinator, Investigators, Lieutenants and Sergeants were able to articulate this information.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.76	Disciplinary sanctions for staff
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • PRE-Audit Questionnaire (PAQ) • Policy 10.1, Sexual Misconduct, General Provisions • Policy 1.8, Administrative, Internal Investigations • Bannock County Sheriff's Office Policy Manual, Policy 308 • Incident Reports <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Detention Investigators • Bannock County Sheriff's Detective <p>Staff are subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Policy 10.1 states, <i>"In accordance with the Sheriff's Office Policy on Requirements/Personal Conduct, all staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual misconduct policies."</i> Also, <i>"Terminations for substantiated violations of agency sexual misconduct policy, or resignations by staff that would have been terminated if not for their resignation, shall be reported to law enforcement agencies that request the information and also reported to P.O.S.T."</i> When interviewed, the Detention Captain/PREA Coordinator stated if a staff member was alleged to have violated a PREA Standard, disciplinary sanctions would be based on the violation.</p>

	<p>Policy 10.1 further states, <i>“All disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the employee’s disciplinary history, and the sanctions imposed for comparable offenses by other members with similar histories. Termination shall be the presumptive disciplinary sanction for all Bannock County Sheriff’s Office employees who have engaged in sexual abuse.”</i> The policy further provides definition of Non-Consensual Sexual Acts, Abusive Sexual Contacts, Sexual Misconduct, Sexual Harassment and Rape. According to the PAQ and the interview with the Detention Captain/PREA Coordinator there were zero (0) staff members that were disciplined, or termination, for violating the sexual abuse and sexual harassment policies within the last twelve (12) months. Had a staff violated the agency’s policy, Tri-County would be the investigating authority. The Auditor reviewed all Incident Reports and there were no Incident Reports that implicated misconduct by a staff.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.77	Corrective action for contractors and volunteers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • PRE-Audit Questionnaire (PAQ) • Incident Reports <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator • Medical and Mental Health Staff <p>The PAQ stated that the agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Additionally, the policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. Policy 10.4 states, <i>“Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies unless the activity was clearly not criminal. In addition to internal and criminal actions, reports will be made to any relevant licensing bodies.”</i> Additionally, <i>“The Bannock County Sheriff’s Office shall take appropriate remedial measures and shall consider whether to prohibit further contact</i></p>

with inmates, termination of services and/or contracts, subsequent to a sustained finding after an allegation of sexual abuse.” The Auditor reviewed all Incident Reports and there were no Incident Reports that implicated misconduct by a contractor or volunteer.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- PRE-Audit Questionnaire (PAQ)
- Incident Reports
- Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review
- Inmate Handbook

Interviews Conducted:

- Detention Captain/PREA Coordinator
- Random and Specialized Staff
- Random and Targeted Inmates
- Mental Health Staff

The PAQ stated that inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The PAQ further states that Inmates are subject to disciplinary sanction only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. The BCDC disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Policy 10.4 states if an inmate filed a false report of sexual abuse, “criminal charges of filing a false Police Report shall be pursued.” If an inmate filed a report in good faith, there would be no disciplinary action taken, “even if an investigation does not establish evidence sufficient to substantiate the allegation.” When interviewed, the Detention Captain/PREA Coordinator stated disciplinary sanctions were proportionate to the nature and circumstances of the abuse commented, the inmates’ disciplinary history, mental disability and mental illness, and the sanctions imposed for similar offenses by other inmates.

When interviewed, the Detention Captain/PREA Coordinator stated disciplinary actions are outlined in the Inmate Handbook; the Inmate Handbook is provided upon

booking. The minor infractions as listed in the Inmate Handbook include, *“The loss of privileges for up to seven days, loss of specific privileges for a specific amount of time.”* Major infractions include *“The loss of privileges for up to 30 days including being locked down for 22 hours and 45 minutes per day, the loss of good time, and or sentencing enhancement per charge.”* As stated in standard 115.22, the Shift Supervisor will make an initial determination if the incident is a minor or major PREA incident to determine what avenue of investigation will be completed. All PREA incidents are documented. The PAQ indicates that the agency prohibits all sexual activity between inmates and the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. In the past twelve (12) months, there were two (2) incidents of administrative finding of inmate-on-inmate sexual abuse at the facility. There were zero (0) allegations of inmate-on-inmate sexual abuse.

Interviews with the Detention Captain/PREA Coordinator, the Mental Health Counselor, and a review of the PAQ found that the facility does not offer on-going counseling services or programming to inmates who have been the victim or perpetrator of sexual abuse while incarcerated at the Bannock County Detention Center. However, they do provide crisis intervention to the victim and perpetrator who may have been involved in a PREA incident while at the facility.

Interviews with staff and inmates confirmed their knowledge of the policy regarding inmates engaging in non-coerced sexual activity. Furthermore, the staff and inmates were aware that the facility has a disciplinary process for inmates who engage in sexual abuse behavior against other inmates and knew that they could be disciplined for sexual abuse.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 5.2, Classification, Primary Classification • Inmate Files <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Interviews with Staff Responsible for Risk Screening • Interviews with Medical and Mental Health Staff

	<p>The PAQ indicated all inmates at the facility who have disclosed prior sexual victimization during a screening pursuant to 115.41 are offered a follow-up meeting with a medical or mental health practitioners within fourteen (14) days of booking. Policy 5.2 states, if an assessment reflects that an inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, the Classification/Booking Deputy shall document the information in the computer reflecting a fourteen (14) day PREA reassessment needs to be completed. This will automatically generate a calendar date for medical and mental health staff to reevaluate the inmate. The Policy further states, <i>“Information received about sexual victimization in an institutional setting shall be strictly limited to security and management decisions, including housing, bed, work, education and program assignments.”</i> When interviewed, medical and mental health care staff were able to articulate this information. Inmates are reassessed in the medical/mental health care office. As reported in the PAQ, reviewed in the inmates’ files, and in the facility Jail Management System (JMS), all inmates who disclosed prior victimization during risk screening were offered this reassessment. The medical and mental health staff have a separate computer entry system that only allows medical and mental health staff to read. The Auditor was able to review this system and obtained some printouts of interview notes. Medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in the facility.</p> <p>Of the currently housed inmates at the time of the on-site review, there was one (1) inmate identified as having reported previous sexual victimization that was interviewed during the targeted inmate interviews. The inmate recalls being offered mental health services.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.2, Sexual Misconduct, Reporting • Medical/Mental Health Secondary Documents <p>Interviews Conducted:</p>

- Medical and Mental Health Staff
- Investigator
- Random Staff
- Random and Targeted Inmates

As reported in the PAQ, and in Policy 10.2, all inmates who are the victim of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention, and the scope of these services shall be determined by medical and mental health practitioners according to their professional judgment. Interviews with medical staff, mental health staff, as well as the Detention Captain/PREA Coordinator confirmed that victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The staff are aware of their responsibilities with regard to protection of the victim and preservation of evidence in the case of a report of sexual assault. Medical and mental health staff are available twenty-four (24) hours per day in case of emergency and/or for crisis intervention services. This was confirmed by the Medical and Mental Health staff. For services that are outside the scope of their experience, the victim can be treated at the local emergency department. Forensic exams are conducted off-site at Portneuf Medical Center by qualified forensic nurse examiners. An advocate from the Family Services Alliance of Southeast Idaho is available at the request of the victim.

Inmate victims of sexual abuse are offered information and access to sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate. Interviews with the Medical staff confirmed they knew of their affirmative duties and responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for STD prophylaxis if required. Medical staff confirmed that victims of sexual abuse would be offered these services either at the emergency room or as a follow-up once returned to the facility. There have been no allegations of sexual assault at the BCDC in the last twelve (12) months which required these services. There is a Medical Assessment Form on which these services are documented.

Forensic examinations will be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE) at a local hospital without a financial cost to the victim. Interviews with medical staff confirm that victims of sexual abuse would not be charged for services received as the result of a sexual abuse incident. There have been no allegations of sexual assault in the last twelve (12) months.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.83

Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- Pre-Audit Questionnaire (PAQ)
- Family Services Alliance of Southeast Idaho MOU

Interviews Conducted:

- Medical and Mental Health Staff
- Random and Targeted Inmates
- Family Services Alliance of Southeast Director

The facility offers medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lock up, or juvenile facility. Interviews with medical staff, mental health staff, as well as the Detention Captain/PREA Coordinator confirm that victims of sexual abuse would receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The staff are aware of their responsibilities regarding protection of the victim and evidence in the case of a report of sexual assault. For services that are outside the scope of their experience, the victim can be treated at the local hospital. Forensic exams are conducted off-site at the local emergency department by qualified forensic nurse examiners. The Executive Director from Family Services Alliance of Southeast Idaho was contacted and confirmed their contract with the Bannock County Detention Center.

As previously stated in Standard 115.21, the BCDC maintains a Memorandum of Understanding (MOU) with the Family Services Alliance of Southeast Idaho. The purpose of the MOU is to ensure mutual support between the parties for the purpose of compliance with the Federal Mandates of the Prison Rape Elimination Act in which the BCDC must provide inmates of sexual abuse with access to victim advocates for emotional support. The MOU establishes terms and conditions upon which the Family Services Alliance of Southeast Idaho will provide victim advocates. Per the MOU and an interview with the Executive Director of Family Services Alliance of Southeast Idaho, the agency will provide on-site crisis intervention when a victim discloses sexual assault or rape. The on-call Advocate will meet the Bannock County Sheriff's Deputy at the Portneuf Medical Center if the victim is to receive a forensic exam.

Crisis intervention will be provided to the victim and if on-going mental health counseling is needed by the victim, Family Services Alliance of Southeast Idaho will provide onsite mental health counseling. The Family Services Alliance of Southeast Idaho mental health counselors are trained in the trauma of sexual assault and have skills to assist the sexual assault survivor in healing from the trauma of assault and maintains the appropriate licensures. If requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff

	<p>member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. Inmates are provided a PREA brochure at the time of intake which includes the name, address, and telephone number, of the Family Services Alliance of Southeast Idaho which lists the victim services they provide.</p> <p>When interviewed, inmates stated they received information regarding the services available to them in the event of a sexual abuse incident. Upon intake the inmates stated they received a handout that provided this information. Furthermore, the inmates were able to articulate that there are postings above the telephones in each living area that provide the phone number and address of the Family Services Alliance of Southeast Idaho in both English and Spanish. While touring the facility, randomly chosen inmates were able to show the Auditor how they would access these services by dialing the posted phone numbers.</p> <p>Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to all lawful pregnancy-related medical services. Medical staff were interviewed and confirmed the fact that they knew that they had an affirmative responsibility to provide care without regard to the ability of the victim pay for services or identify the alleged abuser, and the requirement to make a provision for STD prophylaxis if required. They confirmed that victims of sexual abuse would be offered these services either at the emergency room or as a follow-up once returned to the facility. There have been no allegations of sexual assault in the last twelve (12) months requiring these services. This information is documented in the medical's computer database.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.4, Sexual Misconduct, Investigation/Discipline/Incident Review • Incident Reviews • Sample of Implementation <p>Interviews Conducted:</p>

- Random and Specialized Staff
- Detention Investigators

Policy 10.4 articulates the facility's policy regarding a sexual abuse incident review at the end of every criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded. This incident review must be conducted within thirty (30) days of the conclusion of the sexual abuse investigation. Policy 10.4 states, *"The Review Team will be comprised of at least three (3) people; 1 person from medical or mental health, 1 Detention Investigator or Supervisor, and the Detention Captain/PREA Coordinator, who is an upper-level management official, or the PREA Assistant Coordinator or a Lieutenant. The Review Team will accept input from line supervisors, and medical or mental health practitioners. The Review Team shall:*

- *Consider whether the allegation or investigation indicates a need to change policy to better prevent, detect, or respond to sexual abuse.*
- *Consider whether the allegation or incident was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics.*
- *Examine the area where the incident allegedly occurred, if known, to assess whether physical barriers in the area may have enabled the abuse.*
- *Assess the adequacy of staffing levels in the area during the different shifts.*
- *Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.*
- *Prepare a report of the findings and any recommendations for improvement and submit said report to the Detention Captain. Said report shall be added under the supplemental reports section of either the Jail Incident or the Law Incident Report that was created for the incident."*

A review of prior Incident Team Reviews found that each review contained the necessary information to comply with this standard. All Incident Team Reviews are documented and submitted to the Detention Captain/PREA Coordinator. In some instances, these reviews also noted areas of concern and changes made to improve the safety and security of the inmates and staff. One sample of changes implemented as a result of an incident review was provided to the Auditor, which resulted in repairs to a video camera. Any facility changes or policy updates, as a result of an incident review, would always be documented. In the past twelve (12) months, the facility had six (6) incidents of sexual abuse and sexual harassment allegations. The Review Team conducted an incident review on all cases.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

115.87	Data collection
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 612 374">Documents Reviewed:</p> <ul data-bbox="331 443 975 562" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Policy 10.3, Sexual Misconduct, Operations • Annual PREA Report for 2022 <p data-bbox="256 600 619 633">Interviews Conducted:</p> <ul data-bbox="331 703 884 736" style="list-style-type: none"> • Detention Captain/PREA Coordinator <p data-bbox="256 775 1481 1352">Policy 10.3 is consistent with the requirements of the standard and indicates that data collected pursuant to this standard will be made readily available to the public through the agency website, excluding all personal identifiers. The Auditor reviewed the Annual Reports available on the agency’s website, including data for calendar year 2022. Policy 10.3 states, <i>“Accurate and uniform data shall be collected for every allegation of sexual abuse using a standardized instrument and set of definitions. At a minimum, the data collected will include the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice’s Bureau of Justice Statistics. This data shall be collected, reviewed, and maintained from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. This sexual abuse data shall be aggregated at least annually by a Detention Administrator.”</i> The Auditor reviewed the Annual Report available on the facility’s website, including aggregated sexual abuse data for calendar year 2022.</p> <p data-bbox="256 1391 1453 1675">Interviews with the Detention Captain/PREA Coordinator confirms the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. There is no personally identifying information in the report. The agency supplies the Department of Justice with data from the previous calendar year upon request. The agency does not contract with any agencies to house their residents. The data collected is for the BCDC only.</p> <p data-bbox="256 1713 1437 1787">Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>

115.88	Data review for corrective action
	<p data-bbox="256 1998 959 2031">Auditor Overall Determination: Meets Standard</p> <p data-bbox="256 2074 544 2107">Auditor Discussion</p>

	<p>Documents Reviewed:</p> <p>Pre-Audit Questionnaire (PAQ) Policy 10.3, Sexual Misconduct, Operations Annual PREA Report for 2022</p> <p>Interviews Conducted:</p> <p>Detention Captain/PREA Coordinator</p> <p>Policy 10.3 states, <i>“The aggregated data shall be used to assess and improve the effectiveness of the current sexual abuse prevention, detection and response policies, practices, and training, including:</i></p> <ul style="list-style-type: none"> • <i>Identifying problem areas.</i> • <i>Taking corrective action on an ongoing basis.”</i> <p>The Detention Captain/PREA Coordinator gathers information from the aggregated annual report and prepares an annual report comparing the current year’s data and corrective actions with those from prior years. An assessment of the facilities’ progress in addressing sexual abuse is also be included.</p> <p>Detention Captain/PREA Coordinator reviews data collected and aggregates it annually, to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, procedures, and training. The Annual PREA Report captures data from January 1 to December 31 of each year and any additional information that is required by the SSV-4 form as required by the DOJ. The report also includes a comparison of the current year's data and corrective actions taken to reduce the incident of sexual abuse, sexual harassment, and retaliation with those from prior years. All identifying information is redacted. The annual report is prepared by the Detention Captain/PREA Coordinator. Once approved, the report is uploaded to the Agency’s website, thus making the report readily available to the public.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ)

	<ul style="list-style-type: none"> • Annual PREA Report for 2022 <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Detention Captain/PREA Coordinator <p>All incident-based and aggregated data is stored and locked in the Detention Captain/PREA Coordinator's office and is retained for at least ten (10) years after the data of initial collection. Aggregated sexual abuse data is provided in the annual report and published on the agency's website. The annual report is prepared by the Detention Captain/PREA Coordinator and approved by the Sheriff. This report is uploaded to the Agency's public website annually.</p> <p>Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility MEETS this standard.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents Reviewed:</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) • Prior Bannock County Detention Center PREA Audits from 2016 and 2019 • On-site Facility Tour <p>Interviews Conducted:</p> <ul style="list-style-type: none"> • Random and Targeted Inmates • Random and Specialized Staff • Contractors and Volunteers • Detention Captain/PREA Coordinator <p>This is the third PREA Audit for the BCDC. The agency did not complete an audit during the first audit cycle. However, audits were completed in the second and third audit cycle during the first year of those cycles. This year's audit was completed in the second year of the third audit cycle, which places the agency out of compliance as they were passed the three-year requirement. In addition, and according to the PREA Standards, agencies with only one (1) facility must complete an audit within the first year of each cycle. An agency can come back into compliance if their facility(s) complete an audit prior to the end of the audit cycle. Therefore, by</p>

completing this audit prior to the end of the third-year cycle, the facility has come into compliance.

During the on-site portion of the audit the Auditor was permitted to observe all areas of the facility interior and exterior and permitted to speak with staff and inmates during the tour. In addition to the physical plant, all inmate and staff files, logbooks, incident reports, all computer entries, and medical and mental health files were readily accessible to the Auditor. The Detention Captain/PREA Coordinator and all staff were extremely accommodating when the Auditor requested additional documentation and/or printed copies of documents/forms, including documents or information stored electronically.

During the pre-audit phase, the Detention Captain/PREA Coordinator uploaded policies, procedures, and other documentation into the Online Audit System (OAS). Additional documentation and copies were provided on-site at the Auditor's request. The Auditor and Support Staff were provided with separate private areas to conduct private and confidential interviews and with both staff and inmates who were randomly chosen by the Auditor. The PREA Audit Notice, in both English and Spanish, was posted throughout the facility on August 12, 2023, which was six (6) weeks prior to the audit. This notice contained the Auditor's contact information including email and mailing addresses and identified communication with the Auditor as confidential. These postings were observed during the facility tour in multiple places to include each of the inmate's living areas. During the facility tour, the inmates informed the Auditor that they were aware of the audit and that they could send confidential communication to the Auditor prior to or during the on-site audit. During the post audit period, the Auditor received one (1) anonymous communication letter received via mail. This letter was scanned and forward to the Detention Captain/PREA Coordinator. The letter was a third-party report of sexual harassment. The facility was aware of the reported incident and had investigated the alleged incident. A review of the investigation found that the matter had been closed unfounded and the investigation and outcome were compliant with the PREA Standards.

The Auditor also contacted community-based organizations to gain insight into relevant conditions in the facility. No concerns were noted. During the audit, staff were welcoming and knowledgeable about how they would respond to an incident of abuse and inmates were well informed about the numerous ways in which to report abuse and their rights to be free from sexual abuse. Inmates stated they felt safe and secure within the facility and were aware of who they could contact should a sexual abuse or sexual harassment incident occur. The facility continued to ensure that their PREA policies and practices remained a priority, thus ensuring the sexual safety of residents and staff alike.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Documents Reviewed:

- Bannock County Detention Center Website
- Prior Bannock County Detention Center Audit Reports from 2016 and 2019

Interviews Conducted:

- Detention Captain/PREA Coordinator

The BCDC website maintains links dedicated to PREA-related information, including policies and procedures, reporting an allegation, and final audit reports. This is Bannock County Detention Center third US DOJ PREA Audit. An interview with the Detention Captain/PREA Coordinator and internet search confirmed that final audit reports are posted to the agency's public website.

Based upon the review of agency policies and procedures, all PREA documentation, and interviews, the Auditor has determined the facility **MEETS** this standard.

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

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

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

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

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

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

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

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

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

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

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

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

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

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

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

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

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

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

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

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

	anonymous upon request?	
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

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

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

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

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

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

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

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

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

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

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

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

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

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

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant	yes

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

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

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