

PREA Facility Audit Report: Final

Name of Facility: District VI Juvenile Detention Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/21/2025

Auditor Certification

The contents of this report are accurate to the best of my knowledge.



No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.



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.



Auditor Full Name as Signed: Robert Palmquist

Date of Signature: 10/21/2025

AUDITOR INFORMATION

Auditor name: Palmquist, Robert

Email: robobem@gmail.com

Start Date of On-Site Audit: 09/25/2025

End Date of On-Site Audit: 09/26/2025

FACILITY INFORMATION

Facility name: District VI Juvenile Detention Center

Facility physical address: 137 South 5th Avenue, Pocatello, Idaho - 83201

Facility mailing address: P.O. Box 4926, Pocatello, Idaho - 83201

Primary Contact

Name:	Seth Scott
Email Address:	seths@bannockcounty.us
Telephone Number:	(208)235-2300

Superintendent/Director/Administrator	
Name:	Seth Scott
Email Address:	seths@bannockcounty.gov
Telephone Number:	(208)235-2300

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

Facility Characteristics	
Designed facility capacity:	16
Current population of facility:	9
Average daily population for the past 12 months:	14
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
In the past 12 months, which population(s) has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For	

definitions of “intersex” and “transgender,” please see https://www.prearesourcecenter.org/standard/115-5	
Age range of population:	8-18
Facility security levels/resident custody levels:	Detention lock down
Number of staff currently employed at the facility who may have contact with residents:	23
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	4
Number of volunteers who have contact with residents, currently authorized to enter the facility:	8

AGENCY INFORMATION	
Name of agency:	District VI Juvenile Detention Center Facility Board
Governing authority or parent agency (if applicable):	
Physical Address:	137 South 5th Avenue, Pocatello, Idaho - 83201
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information
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Name:	Seth Scott	Email Address:	seths@bannockcounty.gov
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Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
43	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-09-25
2. End date of the onsite portion of the audit:	2025-09-26

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 Services Alliance Executive Director 355 S. Arthur Avenue, Pocatello, Idaho 83204

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	16
15. Average daily population for the past 12 months:	14
16. Number of inmate/resident/detainee housing units:	3
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" 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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	11
25. 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:	0
26. 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:	0
27. 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
28. 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
29. 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:	0
30. 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:	0

31. 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:	1
32. 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:	0
33. 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:	2
34. 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:	0
35. 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):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. 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:	25
37. 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:	0

38. 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:	2
39. 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:	No text provided.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	10
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Age </div> <div> <input checked="" type="checkbox"/> Race </div> <div> <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) </div> <div> <input checked="" type="checkbox"/> Length of time in the facility </div> <div> <input checked="" type="checkbox"/> Housing assignment </div> <div> <input checked="" type="checkbox"/> Gender </div> <div> <input type="checkbox"/> Other </div> <div> <input type="checkbox"/> None </div>

42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>At 8:00 am on the first day of the Audit, the District VI Juvenile Detention Center count was 11. During the course of the Audit there were two releases and two new intakes. One resident was not available for an interview, he was out of the facility participating in the adjudication of his case. The Auditor interviewed 100% of the residents who were present at the facility.</p>
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
44. 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):	<p>At 8:00 am on the first day of the Audit, the District VI Juvenile Detention Center count was 11. During the course of the Audit there were two releases and two new intakes. One resident was not available for an interview, he was out of the facility participating in the adjudication of his case. The Auditor interviewed 100% of the residents who were present at the facility.</p>
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	<p>2</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
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).	The Auditor interviewed 100% of the residents at the facility. No resident had a physical disability.
48. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <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. </div> <div> <input checked="" type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

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).	The Auditor interviewed 100% of the residents at the facility. No resident presented with a cognitive or functional disability.
49. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>
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).	The Auditor interviewed 100% of the residents at the facility. No resident was blind or had low vision (i.e., visually impaired)
50. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<div> <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. </div> <div> <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed. </div>

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>The Auditor interviewed 100% of the residents at the facility. No resident was Deaf or hard-of-hearing.</p>
51. 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>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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>
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>The Auditor interviewed 100% of the residents at the facility. No resident was Limited English Proficient.</p>
52. 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>0</p>
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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>

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).	The Auditor interviewed 100% of the residents at the facility. No resident identified as lesbian, gay or bisexual during the interview process.
53. 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:	2
54. 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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<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>
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).	The Auditor interviewed 100% of the residents at the facility. No resident had reported sexual abuse in the facility.
55. 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:	0

<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 Auditor interviewed 100% of the residents at the facility. No resident interviewed reported they had disclosed prior sexual victimization during risk screening.</p>
<p>56. 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 Auditor interviewed 100% of the residents at the facility. No resident interviewed reported they had ever been placed in segregated housing/isolation for risk of sexual victimization.</p>

57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	At 8:00 am on the first day of the Audit, the District VI Juvenile Detention Center count was 11. During the course of the Audit there were two releases and two new intakes. One resident was not available for an interview, he was out of the facility participating in the adjudication of his case. The Auditor interviewed 100% of the residents who were present at the facility.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	8
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<div> <input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </div>
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<div> <input checked="" type="radio"/> Yes <input type="radio"/> No </div>
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
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.	

62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	18
63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. 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
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
69. 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 checked="" type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

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.

71. Did you have access to all areas of the facility?

☒ Yes

☐ No

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

72. 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)?

☒ Yes

☐ No

73. 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)?

☒ Yes

☐ No

74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

☒ Yes

☐ No

75. Informal conversations with staff during the site review (encouraged, not required)?

☒ Yes

☐ No

<p>76. 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>During the site review, the Auditor observed all posted and printed signage throughout the facility, including posters, brochures, and electronic displays. (Educational video) This encompassed audit notices, instructions on how to report sexual abuse and sexual harassment, details on accessing outside victim emotional support services, and other relevant PREA information. The content of each sign was clear, easy to understand, and provided at an appropriate reading level for the population confined in the facility. Signage related to services—such as emotional support, and external reporting. Signage was available in English and Spanish. The text size, formatting, and placement accommodated readers, of average height, those with low vision or visual impairments, and residents who are physically disabled or use a wheelchair. The information unobstructed, and legible. Information on how to report sexual abuse and sexual harassment was present in all areas frequented by residents.</p>
<p>Documentation Sampling</p>	
<p>Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.</p>	
<p>77. 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?</p>	<p> <input checked="checked" type="radio"/> Yes <input type="radio"/> No </p>

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

The Auditor reviewed the relevant policies, procedures, reports, and accreditations. The Auditor was provided a sampling of relevant documents for the most recent one-year period. The Auditor was permitted access to and observed all the Juvenile Detention Center areas. The Auditor was permitted to request and receive copies of all relevant documents. The Auditor interviewed Staff, supervisors, and administrators. The Auditor was permitted to conduct private interviews with residents. Residents were allowed to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.

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.

79. 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	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

80. 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	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

81. 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

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

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

Sexual Harassment Investigation Outcomes

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

83. 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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

0

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

The facility reported there had been no incidents of sexual harassment or sexual abuse since 2022.

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

92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility reported there had been no incidents of sexual harassment or sexual abuse since 2022.
94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility reported there had been no incidents of sexual harassment or sexual abuse since 2022.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

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

☐ Yes

☒ No

Non-certified Support Staff

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

☐ Yes

☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

108. 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>

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> Policy 2-18 Prison Rape Elimination Act Procedures District VI Organizational Chart <p>Interviews conducted with:</p> <ol style="list-style-type: none"> PREA Coordinator Detention Manager Agency Head <p>115.311 (a) – The District VI Policy 2-18 Prison Rape Elimination Act Procedures, Page 1, Policy, indicates, the District VI Juvenile Detention Center maintains an unequivocal policy of zero tolerance regarding any instance of rape, sexual abuse, sexual harassment, or sexual activity of any nature within its facility. Such conduct,</p>

	<p>whether criminal or otherwise, is prohibited as it substantially impedes the Center's mandate to provide a safe and secure environment that ensures youth accountability and fosters competency development. In alignment with the Prison Rape Elimination Act of 2003, the Center has formally adopted and enforces a zero-tolerance standard for all forms of sexual abuse and sexual harassment.</p> <p>The District VI Juvenile Detention Center has a zero-tolerance policy and training program that meets the requirements for this standard. Policy 2-18 Prison Rape Elimination Act Procedures, provides the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. It has definitions of prohibited behaviors and sanctions for those prohibited behaviors. The policy provides strategies and responses to reduce and prevent sexual abuse. The policy also includes procedural guidelines, such as screening residents upon intake, training (for both Staff and residents), reporting procedures (both Staff and residents), intervention procedures and investigative guidelines.</p> <p>115.311 (b) – The District VI Policy 2-18 Prison Rape Elimination Act Procedures, Section 1, paragraph A.2., indicates the Detention Manager is the designated PREA Coordinator for the facility. This individual is an upper-level member of the management team. He is responsible for the development and implementation of procedures and training to ensure effective compliance with the PREA Standards. (See District VI Organizational Chart)</p> <p>115.311 (c) – The District VI Juvenile Detention Center is a standalone facility. Therefore, there is no PREA Compliance Manager. The Agency has a PREA Coordinator. The PREA Coordinator indicated he had sufficient time to manage and oversee the implementation of PREA standards. The Supervisors help with PREA implementation and provide input to ensure compliance.</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures addresses 115.311 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, Section 1, paragraph A.2., and the interview with the PREA Coordinator addresses 115.311 (b).</p> <p>The District VI Juvenile Detention Center is a standalone facility. Therefore, there is no PREA Compliance Manager. The Agency has a PREA Coordinator. The PREA Coordinator indicated he had sufficient time to manage and oversee the implementation of PREA standards addresses 115.311 (c).</p> <p>The District VI Juvenile Detention Center complies with 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator.</p>
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115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Documents:</p> <ol style="list-style-type: none"> 1. Minidoka County Contract 2. Mini Cassia PREA Report <p>Interviews:</p> <ol style="list-style-type: none"> 1. Contract Administrator- Detention Manager <p>115.312 (a): Pursuant to the Memorandum of Understanding executed on 10/1/2024 between Minidoka County, and Bannock County, paragraph 10, both parties mutually consent that the Mini-Cassia Juvenile Detention Center shall implement and adhere to the standards delineated in the Prison Rape Elimination Act (PREA). Furthermore, the agreement stipulates that any contracting agencies are similarly required to adopt and comply with PREA standards. In addition, the District VI Juvenile Detention Center administration shall be afforded sufficient opportunity to monitor and verify the contracting agency's ongoing compliance with all applicable PREA requirements. The most recent PREA audit of the Mini-Cassia Juvenile Detention Center was conducted on 11/3/2022.</p> <p>115.312 (b): According to Policy 2-18, Prison Rape Elimination Act Procedures, Section I, Prevention Planning, B., on contracting for resident confinement: If D6JDC ever needs to arrange for residents to be held by other entities or government agencies, those organizations are required to follow PREA standards. Furthermore, any new contracts or contract renewal must include provisions for monitoring to make sure these standards are upheld.</p> <p>Minidoka County Contract addresses 115.312 (a).</p> <p>Policy 2-18, Prison Rape Elimination Act Procedures, Section I, Prevention Planning, B., and the interview with the Contract Administrator, addresses 115.312 (b).</p> <p>The District VI Juvenile Detention Center complies with 115.312 Contracting with other entities for the confinement of residents.</p>
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115.313	Supervision and monitoring
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 1-07 Staff Duties 3. Policy 2-05 Observation Juvenile Movement, Cross Gender Supervision

4. Idaho Juvenile Corrections Act Staffing
5. Staffing plan review 2024-2022
6. Unannounced Round Logs
7. ID Title 20, Chapter 5 Juvenile Corrections Act
8. IDAPA 05.01.02
9. 2025 IDJC Inspection

Interviews conducted with:

1. PREA Coordinator
2. Detention Manager
3. Staff who conduct Unannounced Rounds

115.313 (a): The District VI Juvenile Detention Center staffing plan takes into consideration:

1. Generally accepted juvenile detention and correctional/secure residential practice.
2. Any judicial findings of inadequacy; None at the time of the development of the staffing plan.
3. Any findings of inadequacy from Federal investigative agencies; None at the time of the development of the staffing plan.
4. Any findings of inadequacy from internal or external oversight bodies; None at the time of the development of the staffing plan.
5. All components of the facility's physical plant (including "blind spots" or areas where staff or residents may be isolated);
6. The composition of the resident population.
7. The number and placement of supervisory staff.
8. Institution programs occurring on a particular shift.
9. Any applicable State or local laws, regulations, or standards; (Idaho Administrative Procedures Act section 05.01.02 and Idaho Code 20-chapter 5, Juvenile Corrections Act)
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
11. Any other relevant factors. (Policy 1-07 Staff Duties, pages 5-6, K. 1-5)

The plan reviews the facility's architectural weaknesses. The review includes a review of the population statistics for the previous year and a review of the population for the day on which the review took place. The District VI Juvenile Detention Center maintains a minimum ratio of one Staff member to every 8 youth during the hour's youth are awake, a minimum ratio of one Staff member to every 16 youth during the hours youth are sleeping. (ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, 2025 IDJC Inspection)

115.313 (b): The District VI Juvenile Detention Center complies with the staffing plan. The facility's operating procedures require supervisors to maintain a minimum

staff-to-resident ratio of one staff to eight residents during hours the residents are awake (6:00 am – 6:00 pm) and one staff to sixteen residents during the hours the residents are asleep (6:00 pm – 6:00 am). A supervisor must always be present in the facility, and all fixed posts must be staffed. Mandatory overtime will be used if needed. A staff member of the same sex as the residents shall be on duty during all shifts. This staff member is responsible for supervision that involves physical contact (pat searches) or activities commonly afforded reasonable protection against opposite-sex observation or supervision (use of toilet/shower facilities). There is continual sight and sound surveillance of all residents.

115.313 (c): The Auditor observed, during the onsite visit, the appropriate number of staff supervising residents in compliance with the required PREA ratios. The PREA Coordinator advised that the State of Idaho requires a 1:8 staffing ratio during waking hours, and they are inspected annually for compliance. (2025 IDJC Inspection)

115.313 (d): Policy 1-07 Staff Duties, pages 5-6, K. 3 and 4., states, annually, and preferably during the schedule meeting in November or December supervisor's meeting of each year, with the PREA coordinator, the facility's staffing plan and prevailing staffing practices shall be evaluated and changes or suggestions will be made, documented and evaluated. If the reviewing staff members deem that changes are absolutely necessary to ensure the safety of the juveniles and compliance with PREA standards, District 6 JDC shall consult with the District 6 Juvenile Detention Board and the Bannock County Prosecuting Attorney's office in order to commit necessary resourced to do so.

115.313 (e): Policy 1-07 Staff Duties, page 6, 6., states, Administrators and supervisors and acting supervisors shall conduct and document unannounced round to identify and deter staff sexual abuse and sexual harassment. Such rounds shall be conducted approximately 4 times per 12-hour shift both day shift and night shift. It shall be prohibited for staff to alert other staff members in any way that these supervisory rounds are occurring, either verbally or through any type of communication, unless such announcement is related to some legitimate operational function. Control room staff shall not announce the presence of the Director in the building.

The Auditor reviewed the log containing information documenting unannounced rounds. The log contained daily entries from the day and night shifts. All shifts indicated a supervisor had conducted rounds to detect and deter sexual abuse or sexual harassment incidents. The Auditor interviewed two shift supervisors who indicated they had personally conducted unannounced rounds; the rounds were conducted at random times, and the Staff were unaware they were conducting rounds to detect and deter sexual abuse/harassment. The District VI Juvenile Detention Center maintains a practice of having intermediate-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The procedures for conducting these unannounced rounds are well established in the facility.

	<p>The Auditor observed appropriate staffing levels throughout the facility; video monitoring is available to protect residents from sexual abuse. The staffing plan is reviewed every year. The staffing plan is consistently complied with, and there have been no deviations from the staffing plan in the past 12 months. The staff plan review considers physical plant inadequacies, video monitoring systems, the population levels and the behavior of residents, supervisor availability, and any incidents of sexual abuse or sexual harassment that may have occurred during the year.</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 5. C. 1-4., Policy 1-07 Staff Duties, pages 5-6, K. 1-5, ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, 2025 IDJC Inspection, and Staffing plan review 2024-2022 addresses 115.313(a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 5. C. 1-4., Policy 1-07 Staff Duties, pages 5, K. 2., ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, 2025 IDJC Inspection, and Staffing plan Review 2024-2022, addresses 115.313 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 5. C. 1-4., ID Title 20, Chapter 5 Juvenile Corrections Act, IDAPA 05.01.02, 2025 IDJC Inspection, and Staffing plan review 2024-2022, addresses 115.313 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 5. C. 1-4., Policy 1-07 Staff Duties, pages 5-6, K. 1-5, and Staffing plan review 2024-2022, addresses 115.313 (d).</p> <p>Policy 1-07 Staff Duties, page 6, 6., Policy 2-05 Observation Juvenile Movement, Cross Gender Supervision, page 3 E., Unannounced Round Logs, interviews with PREA Coordinator, Detention Manager and Staff who conduct Unannounced Rounds addresses 115.313 (e).</p> <p>The District VI Juvenile Detention Center complies with 115.313 Supervision and monitoring.</p>
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115.315	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 2-05 Observation Juvenile Movement, Cross Gender Supervision 2. Policy 2-10 Personal Searches 3. Policy 5-01 Personal Hygiene Items 4. Cross Gender PAT Down Training Rosters 2025

5. PREA Resource Center Cross Gender Search Curriculum
6. District VI Site Review

Interviews:

1. Random Staff
2. Random residents
3. Transgender Residents

115.315 (a): District VI Juvenile Detention Center, does not conduct cross-gender strip searches. In the past year, there has been no circumstance where a cross-gender search has taken place. No residents are restricted from participating in any programs. Same-sex individuals conduct all pat searches. Policy 2-10 Personal Searches provides guidance on this subject. All Staff interviewed on this subject indicated they were aware of the search policy and had not deviated from the policy. The staff interviewed were sensitive to the residents' potential vulnerability during the search process. All residents interviewed on this subject indicated they are pat searched by same-sex Staff. Interviews with Random Residents revealed they have never been naked in front of staff members of a different sex. (Policy 2-10 Personal Searches, II, A.)

115.315 (b): Policy 2-10 Personal Searches, II, A., indicates, the juvenile should not be touched any more than is necessary to conduct a comprehensive search. A staff member of the same gender shall do searches. Cross gender Pat Searches will only be conducted in exigent circumstances. If a cross-gender search is required, an incident report will be completed by the staff conducting the search. The facility reported no cross-gender pat searches of residents over the past 12 months on the Pre-Audit Questionnaire. Interviews with Random Staff revealed they are prohibited from conducting cross-gender pat searches unless it is an emergency. Interviews with Random Residents revealed they have never been searched by staff members of the opposite gender.

115.315 (c) – As indicated in Policy 2-10 Personal Searches, II, A., searches of Juveniles require documentation for all cross-gender pat searches, and that cross-gender strip or visual searches are prohibited.

115.315 (d): The District VI Juvenile Detention Center has taken extensive care to ensure all residents shower, perform bodily functions and change clothing outside the Staff's view. The Auditor observed staff members announce that both Male and Female staff work in the facility and were present during the current shift. This announcement was made several times during the shift when residents were moving from one area of the facility to another. The Auditor questioned line staff during the tour about their announcements in the unit. All Staff questioned indicated they made announcement concerning Male and Female staff working in the facility several times a shift. Cross-Gender supervision is conducted in a manner which accomplishes the mission and goals of the facility and at the same time affords the highest degree of privacy possible. (Policy 5-01 Personal Hygiene

Items, All)

During the facility tour, the Auditor observed the resident rooms and shower rooms, these areas were not equipped with cameras. Residents are allowed to use a cover over their windows when a resident is in their room, to change clothing or use the toilet. The shower areas provide privacy for residents when in a stage of undress. The auditor was able to observe video monitoring camera views where residents are housed. The camera views in the Observation Cells with toilets had the toilet area blacked out, allowing residents to utilize the toilets without being viewed on camera. Interviews with Random Staff and Random Residents revealed residents can change their clothes, shower, and use the toilet without being viewed by staff of the opposite sex. Random Staff and Random Residents also advised that announcements regarding the gender of staff working are announced every shift and during mealtimes.

115.315 (e): Policy 2-10 Personal Searches, II, A., indicates, if the resident is identified as transgender or intersex then the staff performing the search will be determined on a case by case basis, this search will be performed by the staff that the inmate prefers. This will be done by asking each juvenile prior to the Pat Search if they identify as transgender or intersex, if the inmate responds yes then the staff will ask them which gender of staff the inmate is most comfortable with searching them. Interviews with Random Staff reflected they are prohibited from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status.

115.315 (f): The PREA Coordinator provided the training curriculum for PREA Training which indicates specific training on conducting searches. Training records were also provided, indicating staff received training in conducting searches.

Interviews with Random Staff revealed they received training in cross-gender pat searches and searches of transgender or intersex residents.

Policy 2-10 Personal Searches, II, A., addresses 115.315 (a).

Policy 2-10 Personal Searches, II, A., interviews with Random staff and Random residents addresses 115.315 (b).

Policy 2-10 Personal Searches, II, A., addresses 115.315 (c).

Policy 2-10 Personal Searches, II, A., Policy 5-01 Personal Hygiene Items, All, interviews with Random staff and Random residents addresses 115.315 (d).

Policy 2-10 Personal Searches, II, A., interviews with Random staff and Transgender Residents, addresses 115.15(e).

PREA Resource Center Cross Gender Search Curriculum, Cross Gender PAT Down Training Rosters 2025 and interview with Random Staff addresses 115.315(f).

The District VI Juvenile Detention Center complies with 115.315 Limits to cross-gender viewing and searches.

115.316	Residents with disabilities and residents who are limited English proficient
	<p data-bbox="279 235 981 268">Auditor Overall Determination: Meets Standard</p> <p data-bbox="279 309 564 342">Auditor Discussion</p> <p data-bbox="279 387 451 421">Documents:</p> <ol data-bbox="341 488 975 734" style="list-style-type: none"> 1. Policy 9-10 Orientation Material 2. Policy 2-19 PREA Procedures 3. Language Line Contract and Guide 4. Sexual Assault Awareness Form (Spanish) 5. Spanish PREA Brochure 6. District VI Site Review <p data-bbox="279 772 427 806">Interviews</p> <ol data-bbox="341 873 660 996" style="list-style-type: none"> 1. Intake staff 2. Random Staff 3. Detention Manager <p data-bbox="279 1034 1481 1612">115.316 (a): The District VI Juvenile Detention Center has procedures to provide disabled residents with the opportunity to participate in efforts to prevent and respond to sexual abuse and harassment. The District VI Juvenile Detention Center uses written, audio, and visual education materials and has interpreter agreements to communicate effectively with residents with disabilities. Residents with intellectual disabilities are given extra attention during the intake process to ensure they understand the information. If necessary, a Mental Health staff member aids in this process. The admitting detention officer takes appropriate steps to ensure that residents with disabilities including, but not limited to, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of the District VI Juvenile Detention programs, and especially those efforts to prevent, detect, and respond to sexual abuse and sexual harassment. (Policy 9-10 Orientation Material, All)</p> <p data-bbox="279 1650 1465 2065">115.316 (b): Policy 9-10 Orientation Material delineates protocols pertaining to residents with disabilities and those who are limited English proficient. In instances where a literacy or language barrier is detected, the facility undertakes diligent and conscientious measures to ensure that the juvenile comprehends the orientation materials. To facilitate this objective, the Resident Handbook is made available in Spanish. Furthermore, the facility employs several bilingual staff members who are positioned to provide linguistic assistance as required. Additionally, the facility maintains access to interpreter services (Language Line), which are capable of delivering interpretation services that are effective, accurate, and impartial, with the ability to utilize specialized vocabulary as necessary. The PREA Coordinator has</p>

	<p>affirmed that, to date, the facility has not been compelled to utilize the Language Line; however, its availability is assured. In circumstances where a juvenile is identified as illiterate, staff members are directed to orally present the orientation materials and seek the support of Mental Health staff. For residents who are deaf, hard of hearing, blind, or possess low vision, staff are instructed to collaborate with the residents to confirm their understanding of the material. The PREA Coordinator has further indicated that the facility has not encountered a resident who is blind or deaf. (Policy 9-10 Orientation Material, All)</p> <p>115.316 (c): The District VI Juvenile Detention Center only uses resident interpreters or assistants in rare cases where a delay in finding an interpreter would risk the resident's safety. The PREA Coordinator indicated that this type of event has never occurred at the facility. Interviews with Random Staff revealed they would not use a resident to interpret PREA information to another resident and would seek the services of an interpreter through a bilingual staff member or through the translation line available to staff. (Policy 9-10 Orientation Material, All)</p> <p>Policy 9-10 Orientation Material, All, District VI Site Review, and interview with Detention Manager addresses 115.316(a).</p> <p>Policy 9-10 Orientation Material, All, District VI Site Review, interviews with intake staff and random staff addresses 115.316(b).</p> <p>Policy 9-10 Orientation Material, All, Language Line Contract and Guide, and interviews with Random Staff addresses 115.316(c).</p> <p>The District VI Juvenile Detention Center complies with 115.316 Residents with disabilities and residents who are limited English proficient.</p>
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115.317	Hiring and promotion decisions
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 1-04 Hiring Procedure 2. Background Check Database 3. Background Investigation Template 4. District VI Employee Records <p>Interviews:</p> <ol style="list-style-type: none"> 1. Administrative (Detention Manager)

115.317 (a): The District VI Juvenile Detention Center policy prohibits hiring or promoting anyone who may have been previously involved in sexual abuse in a prison, jail, lockup, community confinement facility or juvenile facility. Agency policy requires consideration of sexual harassment issues during hiring. Criminal background checks are required. The entire process for hiring or promoting Staff is coordinated through the District VI Juvenile Detention Center Detention Manager.

After the initial application, an initial interview, criminal background record checks, and child abuse registry checks are completed. The District VI Juvenile Detention Center does not hire, promote, or enlist the services of anyone 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).
- 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; or
- Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (b). (Policy 1-04, Hiring Procedure, 2. A.)

115.317 (b): Policy 1-04, Hiring Procedure, 2. A.b., indicates the agency will consider any sexual harassment incidents when hiring or contracting individuals who will interact with residents.

115.317 (c): Policy 1-04, Hiring Procedure, 2. A.b-d., indicates all employees, volunteers or contractors that work in the juvenile detention facility and who will have contact with the juvenile residents of the facility, will undergo a thorough background check prior to being allowed to work with or around the residents. In addition, all employees, volunteers, or contractors have background checks with applicable child abuse registries prior to having any contact with the residents.

Eleven employee files were reviewed; each file contained an initial background check, child abuse registry check, and Idaho State Police fingerprint-based search that includes a search of Idaho Criminal History and Federal Criminal History Records. Administrative Staff advised they utilize the Idaho Law Enforcement Telecommunication System (ILETS) to conduct background checks on everyone who is considered for employment and anyone who has contact with residents. Further the Idaho Health and Welfare Registry is consulted on any employee or anyone who has contact with residents, including contractors and volunteers. The District VI Juvenile Detention Center utilizes Idaho's Bureau of Criminal Identification for records checks. The Bureau of Criminal Identification is Idaho's central repository of criminal records, fingerprints, and crime statistics. The Bureau of Criminal Identification serves as the control terminal agency for the National Crime Information Center (NCIC). Administrative Staff indicated they verify prior employment, both institutional and non-institutional, as part of the pre-hire process.

115.317 (d): Policy 1-04, Hiring Procedure, 2. A.b-d., indicates that all employees,

volunteers, or contractors must undergo background checks with relevant child abuse registries before having any contact with the residents. The Administrative Staff confirmed that background checks are conducted for all potential hires, contractors, and volunteers.

115.317(e): Policy 1-04, Hiring Procedure, pages 5-6 E. and F., indicate that criminal history checks are required every five years or upon promotion. The database review confirms all employees and contractors have had background checks at hiring and five-year intervals.

115.317 (f): Policy 1-04, Hiring Procedure page 2 B.5.a-d., states that District VI Juvenile Detention shall not hire applicants with prior misconduct as described in section 115.317(a). The District VI Juvenile Detention requires all employees to disclose any misconduct described in section 115.317(a). All employees must report to the Director of the Center within 24 hours of any allegations or investigations of misconduct. (Policy 1-04 Hiring Procedure, pages 5-6. E. 1-4)

115.317 (g): Administrative staff further indicated making false statements, providing false documentation, or omitting information during the application process may result in termination. Material omissions or failure to report to the Director regarding such misconduct, or the provision of materially false information, shall be grounds for termination. (Policy 1-04 Hiring Procedure, page 6. E. 3-4)

115.317 (h): The Director stated they would provide information on substantiated allegations of sexual abuse or sexual harassment involving former employees upon receiving a request from an institutional employer for whom such employee has applied to work. (Policy 1-04 Hiring Procedure, page 6. F.)

Policy 1-04, Hiring Procedure, 2. A., and the administrative staff interview addresses 115.317 (a).

Policy 1-04, Hiring Procedure, 2. A.b., and the administrative staff interview address 115.317 (b).

Policy 1-04, Hiring Procedure, 2. A.b-d., and the administrative staff interview addresses 115.317 (c).

Policy 1-04, Hiring Procedure, 2. A.b-d., and the administrative staff interview addresses 115.317 (d).

Policy 1-04, Hiring Procedure, pages 5-6 E. and F., and the administrative staff interview addresses 115.317 (e).

Policy 1-04, Hiring Procedure page 2 B.5.a-d., District VI Employee Worksheets and Administrative Staff interview addresses 115.317 (f)

Policy 1-04 Hiring Procedure, page 6. E. 3-4 and the administrative staff interview address 115.317 (g).

Policy 1-04 Hiring Procedure, page 6. F., and the administrative Staff interview

	<p>addresses 115.317 (h).</p> <p>The District VI Juvenile Detention Center complies with standard 115.317: Hiring and promotion decisions.</p>
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115.318	Upgrades to facilities and technologies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Camera and Intercom Memo <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Detention Manager <p>115.318 (a) - The facility reported no substantial expansion or modification to existing facilities since the last PREA audit.</p> <p>115.318 (b) - The facility reported at total of 58 cameras and 2 mirrors located throughout the facility.</p> <p>The District VI Juvenile Detention Center has not acquired a new facility or expanded or modified the existing facility since August 20, 2012. The District VI Juvenile Detention Center has made minor changes to the video system; specifically, they have repaired cameras as needed. The PREA Coordinator indicated these changes were made to improve the Detention Center's ability to protect residents from sexual abuse. Currently, there are 58 cameras; all have recording capability. The camera system is used to monitor areas within and outside of the facility. The system can be monitored from the Control Room, Management Assistant Desk, Directors Desk, and the Court Marshall stations at the facility and remotely from the Bannock County Courthouse, Management Assistant and Directors laptop computers. The cameras are made by AXIS and are managed through exacVision software. During the Site Review, the auditor was able to observe the location of cameras throughout the facility, as well as the camera views in the facility Control Room.</p> <p>Camera and Intercom Memo and interviews with the PREA Coordinator and the Detention Manager address 115.318 (a).</p> <p>Camera and Intercom Memo and interviews with the PREA Coordinator and the</p>

	<p>Detention Manager address 115.318 (b).</p> <p>The District VI Juvenile Detention Center complies with standard 115.318: Upgrades to facilities and technologies.</p>
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115.321	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Idaho Sexual Assault Response Guidelines 4. 19-5303. COST OF MEDICAL EXAMS 5. Family Services Alliance MOU <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Staff 2. PERA Coordinator 3. Family Services Alliance <p>115.321 (a): The facility reported the Bannock County Sheriff's Office would conduct criminal sexual abuse investigations, while the Bannock County Prosecuting Attorney's Office would conduct administrative investigations. (Policy 6-18 Abuse Reporting, page 3 D.) District VI staff are trained to secure crime scenes for preservation of evidence for the investigative authority. The law enforcement agency would arrange to provide all victims of sexual abuse a forensic medical examination to be conducted by an appropriately trained examiner, preferably a Sexual Assault Forensic Examiner (SAFE) or a Sexual Abuse Nurse Examiner (SANE). (Idaho Sexual Assault Response Guidelines page 35). Sexual Assault Nurse Examiners (SANEs) at Portneuf Medical Center would conduct forensic examinations for residents at the District VI Juvenile Detention Center. Victims of sexual assault would be provided access to a Sexual Assault Advocate from Family Services Alliance. Advocates are present during the sexual assault examination. Additionally, an advocate would assist with interpretation of medical-legal needs and follow up as needed.</p> <p>115.321 (b): The Bannock County Sheriff's office follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions and administrative proceedings, which occur after the criminal process is completed. The protocol is developmentally appropriate for youth and minimizes the trauma to the child victim. (Idaho Sexual Assault Response Guidelines page 32).</p>

115.321 (c): Sexual Assault Nurse Examiners (SANEs) at Portneuf Medical Center would conduct forensic examinations for residents at the District VI Juvenile Detention Center. Victims of sexual assault would be provided access to a Sexual Assault Advocate from the Family Services Alliance. Advocates are present during the sexual assault examination. Additionally, an advocate would assist with transportation and interpretation of medical-legal needs and follow up as needed. (see also Policy 2-18 Prison Rape Elimination Act Procedures, page 7 II.A.,1-3) Policy 2-18 Prison Rape Elimination Act Procedures, Page 7, II.A.2.a., states, "If such examination is not covered for payment by the BCSO, the D6JDC shall bear the cost of the examination." Additionally, Idaho Title 19 Chapter 53-Section 19-5303 Compensation of Victims of Crimes indicates the cost of forensic and/or medical examinations of alleged victims of sexual assault shall be paid for from the crime victims compensation account. (19-5303 Cost of Medical Exams).

115.321 (d): The MOU between District VI Juvenile Detention Center and Family Services Alliance indicates that Family Services Alliance will provide victim advocacy as requested by a resident. Family Services Alliance helps survivors of domestic abuse and sexual assault. Individuals can call our 24-hour crisis helpline 365 days a year. Family Services Alliance provides immediate advocacy, safety planning, and crisis intervention for survivors. Family Services Alliance advocates are on call with Portneuf Medical Center, supporting survivors throughout any medical exams, law enforcement interviews and throughout the legal process. The Auditor interviewed the Executive Director at Family Services Alliance. The Executive Director stated Family Services Alliance would support the victim through the forensic examination and investigatory interviews. The PREA Coordinator established an appropriate Memorandum of Understanding that meets the requirements to provide services to sexual abuse or harassment victims.

115.321 (e): As indicated above (115.321(d), the MOU between District VI Juvenile Detention Center and Family Services Alliance states, a victim advocate will be provided to support the resident through the forensic medical exam process and investigatory interviews, as well as provide emotional support, crisis intervention information, and referrals, as requested by the resident. The Auditor interviewed the Executive Director from Family Services Alliance. The Executive Director indicated a victim of a sexual assault would be provided an advocate and services for intervention and related assistance. Family Services Alliance would support the victim through the forensic examination and investigatory interviews.

115.321 (f): The Bannock County Sheriff's Office Police Department follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for criminal prosecutions and administrative proceedings, which occur after the criminal process is completed. The protocol is developmentally appropriate for youth and minimizes the trauma to the child victim. (Idaho Sexual Assault Response Guidelines)

115.321 (h): Family Services Alliance advocates are trained in Crisis Intervention which provides comprehensive skills for assisting individuals in crisis. All advocates are trained to be equipped to help individuals in sexual assault situations. Family

	<p>Services Alliance ensures all victim advocates are screened for appropriateness to be advocates and have received training concerning sexual assaults and forensic examinations. Policy 2-18 Prison Rape Elimination Act Procedures, page 7 II.3.b, states, “If any member of the D6JDC has been screened for appropriateness and has received appropriate training and education concerning sexual assault and forensic examinations issues in general, they may be assigned at the victim’s request to accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals.” Currently, the District VI Juvenile Detention Center does not provide an agency staff member or a community-based staff member to provide advocacy services. Advocacy services are provided through Family Services Alliance.</p> <p>Policy 6-18 Abuse Reporting, page 3 D., Policy 2-18 Prison Rape Elimination Act Procedures, page 7, II A.1-2., and Idaho Sexual Assault Response Guidelines, address 115.321(a).</p> <p>Idaho Sexual Assault Response Guidelines, pages 32-37, addresses 115.321(b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, Page 7, II.A.2.a., addresses 115.321(c).</p> <p>MOU Family Services Alliance, interviews with PREA Coordinator and Family Services Alliance addresses 115.321(d).</p> <p>Family Services Alliance MOU, interviews with PREA Coordinator and Family Services Alliance Advocate addresses 115.321(e).</p> <p>Idaho Sexual Assault Response Guidelines, pages 32-37, address 115.321(f).</p> <p>Family Services Alliance MOU and interview with Family Services Alliance addresses 115.321(h).</p> <p>The District VI Juvenile Detention Center complies with standard 115.321: Evidence protocol and forensic medical examinations.</p>
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115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Idaho Sexual Assault Response Guidelines

4. Section 31-2604 – Idaho State Legislature

Interviews

1. Detention Manager

115.322 (a): The District VI Juvenile Detention Center supervisors ensure that an administrative or criminal investigation is completed for all sexual abuse and sexual harassment allegations. The Detention Manager coordinates administrative and criminal investigations of alleged incidents of sexual misconduct as directed by the Bannock County Sheriff's Office and the Bannock County Prosecuting Attorney's Office. The Bannock County Sheriff's Office conducts criminal sexual abuse investigations, while the Bannock County Prosecuting Attorney's Office conducts administrative investigations. (Policy 6-18 Abuse Reporting, page 3 D.)

115.322 (b): The Bannock County Sheriff's Office Police Department and the Prosecuting Attorney's Office have legal authority to conduct investigations. The District VI Juvenile Detention Center has a policy to ensure referrals of allegations for investigations. (Policy 6-18 Abuse Reporting, page 3 D.) The facility prohibits all acts of sexual harassment, sexual misconduct, and sexual abuse. All allegations involving sexual harassment or sexual abuse will be investigated. Allegations, other than those which fall under criminal code, will be administratively investigated by the Bannock County Prosecuting Attorney's Office.

115.322 (c) – As indicated in 115.322 (b), Policy 6-18 Abuse Reporting describes the responsibilities of the facility and Bannock County Sheriff's Office Police Department in relation to criminal investigations. (Policy 6-18 Abuse Reporting, page 3 D.)

The District VI Juvenile Detention Center documents all referrals. The Auditor interviewed the Detention Manager who indicated he would coordinate the release of any documentation, coordinate staff interviews and give the Bannock County Sheriff's Office unlimited access to the facility as needed for conducting a criminal investigation.

The Bannock County Prosecuting Attorney's Office conducts internal investigations into employee misconduct. The County Prosecuting Attorney is required to prosecute all actions, civil or criminal, felony or misdemeanor and to give advice to public officers of the county to which they serve. (Section 31-2604 – Idaho State Legislature)

The District VI Juvenile Detention Center ensures both administrative and criminal investigations are completed for all allegations of sexual abuse and sexual harassment. The facility has procedures requiring investigations by the Bannock County Sheriff's Office Police Department and the Bannock County Prosecuting Attorney's Office. If an administrative investigation potentially involves criminal behavior, the investigation is referred to the Bannock County Sheriff's Office. The agency documents all referrals. The District VI Juvenile Detention Center website provides information concerning PREA, and the PREA Policy is posted on the Web

	<p>site (https://www.bannockcounty.gov/wp-content/uploads/2021/06/6-18-Abuse-Reporting.pdf).</p> <p>Policy 6-18 Abuse Reporting, page 3 D., and the interview with the Detention Manager address 115.322(a).</p> <p>Policy 6-18 Abuse Reporting, page 3 D., and the interview with the Detention Manager address 115.322(b).</p> <p>Policy 6-18 Abuse Reporting, page 3 D., and the agency web site, (https://www.bannockcounty.gov/wp-content/uploads/2021/06/6-18-Abuse-Reporting.pdf) addresses 115.322 (c).</p> <p>The District VI Juvenile Detention Center complies with standard 115.322: Policies to ensure referrals of allegations for investigations.</p>
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115.331	Employee training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 1-06 Staff Training 2. Acknowledgement of Training PREA Education Samples 3. Acknowledgement of Training PREA Policy and Procedure Samples 4. Acknowledgement of Training PREA Prohibited Sexual Contact Samples 5. PREA Direct Care Staff Training 2025 PowerPoint 6. Supervision LGBTQI and Gender Nonconforming PowerPoint <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Staff interviews <p>115.331 (a): Policy 1-06 Staff Training specifies the PREA Training requirements. The District VI Juvenile Detention Center trains all employees who may have contact with residents on: the zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities pursuant to the PREA Standards; residents' right to be free from sexual abuse and sexual harassment; the right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment; the common reactions of victims of sexual abuse and sexual harassment; how to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents; how to avoid inappropriate relationships with residents; how to communicate effectively</p>

and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender non-conforming residents; and laws related to mandatory reporting of sexual abuse and the age of consent. The training covers both male and female residents. The District VI Juvenile Detention Center provides employees with refresher training every year. (Policy 1-06, pages 2-3, II. 4. a-d)

115.331 (b): The facility houses both male and female residents. The facility provides Cross-Gender and Transgender Pat Search Training including a video on the subject. The facility also provides specific training on Supervision of LGBTQI and Gender Nonconforming residents. Training is tailored to the unique needs and attributes of residents. Employees are well versed in the Detention Center's current sexual abuse and sexual harassment policies, standard operating procedures, and Cross-Gender/Transgender Pat Search procedures. (Policy 1-06, page 3, 4. A.xi.

115.331(c): All current employees are trained and participate in PREA refresher training on a yearly basis. (Policy 1-06, pages 2-3, II. 4. a-d)

115.331 (d): The District VI Juvenile Detention Center documents that employees understand their training. The Auditor reviewed employee training records, and the PREA Coordinator provided copies of training records for the employees. The training records indicate that PREA Training is provided annually. (Policy 1-06, pages 2-3, II. 4. a-d, Acknowledgement of Training PREA Education Samples, Acknowledgement of Training PREA Policy and Procedure Samples, Acknowledgement of Training PREA Prohibited Sexual Contact Samples)

Eight random staff interviews were conducted. The staff members interviewed by the Auditor indicated a clear understanding of the Prison Rape Elimination Act. The random Staff interviewed were able to recall information from the training, such as the zero tolerance for sexual assault and sexual harassment, professional and gender-specific pat search procedures, how to respond to sexual assaults and the first responder's duties. Staff members recalled how to avoid inappropriate relationships with residents, the dynamics of sexual abuse in prison, and how to detect signs of sexual abuse. All employees have been trained, and the Auditor confirmed the training records of the employees. All Staff interviewed confirmed their participation in PREA training and knowledge of the training curriculum.

Policy 1-06, pages 2-3, II. 4. a-d, Acknowledgement of Training PREA Education Samples, Acknowledgement of Training PREA Policy and Procedure Samples, Acknowledgement of Training PREA Prohibited Sexual Contact Samples, PREA Direct Care Staff Training 2025 PowerPoint and interviews with Random staff addresses 115.331 (a).

Policy 1-06, page 3, 4. A.xi., PREA Direct Care Staff Training 2025 PowerPoint, Supervision LGBTQI and Gender Nonconforming PowerPoint, and interviews with Random staff addresses 115.331 (b).

Policy 1-06, pages 2-3, II. 4. a-d, Acknowledgement of Training PREA Education Samples, Acknowledgement of Training PREA Policy and Procedure Samples, Acknowledgement of Training PREA Prohibited Sexual Contact Samples, PREA Direct

	<p>Care Staff Training 2025 PowerPoint and interviews with Random staff addresses 115.331 (c).</p> <p>Policy 1-06, pages 2-3, II. 4. a-d, Acknowledgement of Training PREA Education Samples, Acknowledgement of Training PREA Policy and Procedure Samples, Acknowledgement of Training PREA Prohibited Sexual Contact Samples, and interviews with Random staff addresses 115.331 (d).</p> <p>The District VI Juvenile Detention Center complies with standard 115.331: Employee training.</p>
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115.332	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. PREA Contractor Volunteer Intern Training PowerPoint 3. Volunteer and Contractor Training Tracking sheet 4. Volunteer and Contractor Training Acknowledgements Samples <p>Interviews:</p> <ol style="list-style-type: none"> 1. Contractors <p>115.332 (a): Policy 2-18 Prison Rape Elimination Act Procedures indicates contractors and volunteers receive PREA training based on their contact level with juveniles. Those working individually with juveniles must complete approved PREA training before starting. All other volunteers and contractors must acknowledge the Zero Tolerance policy and reporting requirements related to sexual assault and harassment. Training and documentation are kept in individual files. (Policy 2-18 Prison Rape Elimination Act Procedures, page 8-10, III. B.)</p> <p>115.332 (b): Volunteers and contractors are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. Additionally, all volunteers and contractors are informed of the facility's zero tolerance policy regarding sexual abuse and sexual harassment and how to report incidents involving sexual abuse and sexual harassment. (Policy 2-18 Prison Rape Elimination Act Procedures, page 8-10, III. B., PREA Contractor Volunteer Intern Training PowerPoint)</p> <p>115.332 (c): The District VI Juvenile Detention Center maintains documentation confirming that contractors and volunteers understand their training. (Policy 2-18</p>

	<p>Prison Rape Elimination Act Procedures, page 8-10, III. B., Volunteer and Contractor Training Tracking sheet, Volunteer and Contractor Training Acknowledgements Samples)</p> <p>The Auditor interviewed three Contractors, (one teacher, one Mental Health Clinician, one Medical). The Contractors stated they had been trained in their sexual abuse and sexual harassment prevention, detection, and response responsibilities. The Contractors further indicated they understood the zero-tolerance policy.</p> <p>Contractors and Volunteers are informed of the resident's right to be free from sexual abuse and to be free from retaliation for reporting sexual abuse and harassment incidents. The District VI Juvenile Detention Center maintains documentation confirming that volunteers and contractors understand their training.</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 8-10, III. B., and interviews with Contractors addresses 115.332 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 8-10, III. B., PREA Contractor Volunteer Intern Training PowerPoint and interviews with Contractors addresses 115.332 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 8-10, III. B., Volunteer and Contractor Training Tracking sheet, Volunteer and Contractor Training Acknowledgements Samples and interviews with Contractors addresses 115.332 (c).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.332: Volunteer and Contractor training.</p>
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115.333	Resident education
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 9.07 Resident Orientation 3. Posters Information 4. PREA brochure D6JDC 5. Spanish PREA Brochure 6. Resident 10-day PREA Training Tracking Sheet

- 7. Resident Handbook
- 8. District VI Site Review
- 9. Resident Records

Interviews

- 1. Intake Staff
- 2. Random Residents

115.333 (a) Residents receive information on zero tolerance, how to report sexual abuse and harassment incidents, their right to be free from sexual abuse and harassment, and to be free from retaliation for reporting incidents. In addition, residents are informed about how the District VI Juvenile Detention Center will respond to such incidents. Intake Staff interviews verify that residents receive the appropriate information. In addition to this information, residents are provided with a PREA Brochure, which outlines how to report sexual abuse and harassment. The Auditor confirmed all residents received this information. Interviews with residents also confirm that the Detention Center Staff provide information on reporting incidents of sexual abuse. The Agency documents the receipt of this information.

The Auditor reviewed random intake files; each contains documentation concerning the orientation date (intake), screening date, PREA Acknowledgement date, initial education date and comprehensive education date. Ten residents were interviewed, all ten indicated they received PREA information during intake. (Policy 9.07 Resident Orientation, All)

115.333 (b): All residents who remain at the District VI Juvenile Detention Center for more than ten days receive comprehensive education on PREA. The facility utilizes the State of Idaho Juvenile Corrections PREA video for their comprehensive resident PREA education. This auditor viewed the PREA video, which is 9.36 minutes in length and covers the definitions of sexual abuse and sexual harassment, zero tolerance for sexual abuse, sexual harassment, retaliation for reporting, the dynamics of sexual abuse/sexual harassment, how to report incidents of sexual abuse/sexual harassment, how to protect against sexual abuse/sexual harassment, how to preserve evidence of sexual abuse and consequences for filing a false report. The video is a comprehensive PREA education tool that is presented in a clear, age-appropriate manner. A review of eleven resident files reflected seven residents viewed the PREA video within ten days of intake. Four residents had been released prior to the comprehensive educational class. (Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records)

115.333 (c): Comprehensive educational sessions are conducted weekly and involve a review of PREA and a video concerning the residents' right to be free from sexual abuse, harassment and retaliation while incarcerated. Residents' participation in these educational classes is documented. All residents receive the comprehensive PREA education within ten days of intake, as the video is shown once a week to every resident. (Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training

Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records)

115.333 (d): Throughout the facility, information is posted about PREA, Zero Tolerance and how to report incidents of sexual abuse. This information is presented in both Spanish and English. This information is visible and readily available. There is information provided to the residents concerning the services of Family Services Alliance. Family Services Alliance provides 24-hour crisis line services, legal advocacy, counseling, sexual assault intervention services, prevention education, family advocacy and support for children affected by violence. Resident interviews confirm this information is available. (Posters Information, PREA brochure D6JDC, Spanish PREA Brochure, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review)

The District VI Juvenile Detention Center has procedures to provide resident education in formats accessible to all residents. Residents who are limited English proficient, deaf, visually impaired, or otherwise disabled can participate in efforts to prevent and respond to sexual abuse and harassment. The District VI Juvenile Detention Center uses written and visual education materials and has interpreter agreements to communicate effectively with residents. Residents with intellectual disabilities are given extra attention during the intake process to ensure they understand the information. If necessary, a Mental Health staff member aids in this process. The admitting detention officer takes appropriate steps to ensure that residents with disabilities including, but not limited to, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities, have an equal opportunity to participate in or benefit from all aspects of the District VI Juvenile Detention programs, and especially those efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

115.333 (e): The District VI Juvenile Detention Center maintains documentation of resident participation in comprehensive education classes. A review of eleven resident files reflected seven residents viewed the PREA video within ten days of intake. Four residents had been released prior to the comprehensive educational class. Ten residents were interviewed, all ten indicated they received PREA information during intake and subsequently participated in comprehensive education. (Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records)

115.333 (f) - During the Site Review, this auditor observed the "Speak Up and Speak Out!" and the "Break the Silence of Abuse" posters throughout the facility, including resident housing, Intake, recreation areas, (Multipurpose area) and education. (District VI Juvenile Detention Facility Site Review)

Policy 9.07 Resident Orientation, All, District VI Juvenile Detention Facility Site Review, PREA brochure D6JDC, Spanish PREA Brochure, interviews with Intake staff and random residents addresses 115.333(a).

Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records, interviews with

	<p>Intake staff and random residents addresses 115.333(b).</p> <p>Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records, interviews with Intake staff and random residents addresses 115.333(c).</p> <p>Posters Information, PREA brochure D6JDC, Spanish PREA Brochure, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, interviews with Intake staff and random residents addresses 115.333(d).</p> <p>Policy 9.07 Resident Orientation, All, Resident 10-day PREA Training Tracking Sheet, District VI Juvenile Detention Facility Site Review, Resident Records, interviews with Intake staff and random residents addresses 115.333(e).</p> <p>District VI Juvenile Detention Facility Site Review, PREA brochure D6JDC, and Spanish PREA Brochure, addresses 115.333(f).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.333: Resident education.</p>
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115.334	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Investigator and Prosecutor Training 4. Idaho Sexual Assault Response Guidelines 5. Uniform evidence protocol Idaho State Police <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager <p>115.334 (a) The Detention Manager coordinates administrative and criminal investigations of alleged incidents of sexual misconduct as directed by the Bannock County Sheriff's Office and the Bannock County Prosecuting Attorney's Office. The Bannock County Sheriff's Office conducts criminal sexual abuse investigations, while the Bannock County Prosecuting Attorney's Office conducts administrative investigations. (Policy 6-18 Abuse Reporting, page 3 D., and Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2.) The Investigators have received</p>

	<p>training in conducting investigations in confinement settings. (Investigator and Prosecutor Training)</p> <p>115.334(b): The training includes the proper use of Miranda and Garrity warnings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or criminal referral. (Idaho Sexual Assault Response Guidelines and Uniform Evidence Protocol Idaho State Police)</p> <p>115.334 (c): The District VI Juvenile Detention Center maintains documentation for the training as provided by Bannock County. (Investigator and Prosecutor Training)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2., Policy 6-18 Abuse Reporting, page 3 D., Investigator and Prosecutor Training and the interview with the Detention Manager address 115.334 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2., Idaho Sexual Assault Response Guidelines and Uniform Evidence Protocol Idaho State Police, addresses 115.334(b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2., Investigator and Prosecutor Training, addresses 115.334 (c).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.334: Specialized training: Investigations.</p>
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115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. PREA Training Medical and Mental Health 3. Specialized Training Medical and Mental Health <p>Interviews</p> <ol style="list-style-type: none"> 1. Medical staff interview

2. Mental Health interview

115.335 (a) – Policy 2-18 Prison Rape Elimination Act Procedures, indicates medical and mental health care practitioners who work regularly in the facility are trained in: a. How to detect and assess signs of sexual abuse and sexual harassment, b. How to preserve physical evidence of sexual abuse; c. How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and d. How and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The mental health staff received training on identifying signs of sexual abuse and responding effectively to victims. Specialized training also included victim identification, interviewing, and interventions. (Policy 2-18 Prison Rape Elimination Act Procedures, pages 10-11, E.)

115.335(b): Medical Staff advised they do not conduct forensic medical examinations at the facility.

115.335(c): The facility provided training certificates for “Specialized Training for Medical and Mental Health Professionals. (Specialized Training Medical and Mental Health)

115.335 (d): The District VI Juvenile Detention Center provides PREA training to the facility's medical and mental health practitioners. The training includes detecting signs of sexual abuse/harassment, preventing the destruction of evidence, responding to victims, and reporting allegations or suspicions of sexual abuse and sexual harassment. (PREA Training Medical and Mental Health)

Policy 2-18 Prison Rape Elimination Act Procedures, pages 10-11, E., PREA Training Medical and Mental Health, Specialized Training Medical and Mental Health, and the interviews with Medical and Mental Health Staff addresses 115.335(a).

Interview with Medical Staff addresses 115.335 (b).

Policy 2-18 Prison Rape Elimination Act Procedures, pages 10-11, E., PREA Training Medical and Mental Health, Specialized Training Medical and Mental Health, and the interviews with Medical and Mental Health Staff addresses 115.335 (c).

PREA Training Medical and Mental Health, and the interviews with Medical and Mental Health Staff addresses 115.335 (d).

The District VI Juvenile Detention Center complies with Standard 115.335: Specialized training: Medical and mental health care.

115.341	Obtaining information from residents
	<p data-bbox="279 185 981 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="279 264 564 297">Auditor Discussion</p> <p data-bbox="279 342 443 376">Documents</p> <ol data-bbox="341 443 1102 891" style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 9-08 Classification and Housing 3. Policy 5-01 Personal Hygiene Items 4. Vulnerability Assessment Samples 5. 72-hour admission and vulnerability assessments 6. Admission form Blank 7. Sexual Assault Awareness forms samples 8. Vulnerability assessment Blank 9. Alaska Screening Tool Blank 10. Maysi 2 Description 11. Resident Records <p data-bbox="279 936 437 969">Interviews:</p> <ol data-bbox="341 1037 892 1193" style="list-style-type: none"> 1. Staff who perform risk assessments 2. PREA Coordinator 3. Intake Staff 4. Random Residents <p data-bbox="279 1238 1460 1608">115.341 (a): All residents are provided with Risk Assessments upon intake. The policy provides that assessments are conducted within the first 72 hours; however, the Auditor notes that these assessments are done almost immediately after the initial intake. The assessment includes the mental, physical and developmental disability of the resident, the age of the resident, the physical build of the resident, previous incarcerations, criminal history, prior sex offenses, whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming, prior sexual victimization and the resident's perception of their vulnerability. (Policy 9-08 Classification and Housing, page 1-2, II. A. 1-3.)</p> <p data-bbox="279 1641 1476 2011">115.341 (b): The Admission form Blank, Vulnerability assessment Blank, MASI II, and Alaska Screening Tool assess various vulnerabilities. They consider age, prior placements in locked juvenile facilities, feelings about being in such facilities, perceived risk of attack or abuse, history of threats, harassment, or actual attacks, bullying, unwanted sexual experiences (reported or not), identification as LGBT or intersex, and arrests on sexual or violent offenses. Assessments also evaluate intellectual impairment, learning disabilities, special education needs, or developmental delays. (Policy 9-08 Classification and Housing, page 1-2, II. A. 1-3, Maysi 2 description, Alaska Screening Tool blank)</p> <p data-bbox="279 2045 1481 2078">115.341 (c): Using the Admission form, Vulnerability assessment, MASI II, and Alaska</p>

Screening Tool, the District VI Juvenile Detention Facility seeks to gather information on:

- Prior sexual victimization or abusiveness
- Gender nonconforming appearance or behavior, or identification as lesbian, gay, bisexual, transgender, or intersex
- Current charges and offense history
- Age
- Emotional and cognitive development
- Physical size and stature
- Mental illness or disabilities
- Intellectual or developmental disabilities
- Physical disabilities
- Resident's perception of vulnerability
- Any other specific needs for supervision, safety precautions, or separation from other residents

Staff Responsible for Risk Screening advised that they consider age, prior placements, whether the resident feels safe, have they been abused before, violence history, sexual offense history, the resident's size, and any disabilities.

115.341 (d): Information shall be ascertained through conversations with the juvenile during the intake process and medical and mental health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the juvenile's files. (Policy 9-08 Classification and Housing, page 2, II. A. 3)

115.341 (e): The District VI Juvenile Detention Center staff shall disseminate all responses to questions asked pursuant to this standard only on an as needed basis only to ensure that sensitive information is not exploited to the residents' detriment by staff or other juveniles. (Policy 9-08 Classification and Housing, page 2, II. A. 4)

The PREA Coordinator advised that the Risk Screening forms are placed in the resident's file which are stored in locked file cabinets. Medical and Mental Health files are stored in locked file cabinets in their respective areas. All information gathered during intake is shared with only those Staff that needs to know. Sensitive information is not shared unnecessarily. Residents at the Detention Center indicated they had been queried on questions concerning whether they had been victims of sexual abuse or sexual harassment or if they had been arrested or charged with a sex offense. Screening staff affirmatively ask residents about their sexual orientation and gender identity by inquiring if they identify as lesbian, gay, bisexual, transgender, or intersex (LGBTI), in addition to making a subjective determination about perceived status. The PREA screening information is used to assist in decisions regarding a Resident's housing unit, educational needs, and interventions. The screening process is designed to encourage Residents to disclose sensitive information about previous sexual abuse and vulnerabilities they may have, including their sexual orientation and gender identity.

	<p>Interviews with Intake, Medical, and Mental Health staff confirmed the use of assessment tools. Intake staff assess all residents, especially those with special needs or feelings of vulnerability, to ensure safe housing and resources. The Auditor reviewed several resident files, which contained signed Intake forms from both officers and residents.</p> <p>Policy 9-08 Classification and Housing, page 1-2, II. A. 1-3., , Maysi 2 description, Alaska Screening Tool blank, 72-hour admission and vulnerability assessments, and interviews with Staff who perform risk assessments and random residents addresses 115.341 (a).</p> <p>Policy 9-08 Classification and Housing, page 1-2, II. A. 1-3, Maysi 2 description, Alaska Screening Tool blank, and Vulnerability Assessment Samples address 115.341 (b).</p> <p>Admission form, Vulnerability assessment, MASI II, and Alaska Screening Tool, Vulnerability Assessment Samples, interviews with Staff who perform risk assessments and Intake staff addresses 115.341 (c).</p> <p>Policy 9-08 Classification and Housing, page 2, II. A. 3, Vulnerability Assessment Samples, Sexual Assault Awareness forms samples, interviews with Staff who perform risk assessments and Intake staff address 115.341 (d).</p> <p>Policy 9-08 Classification and Housing, page 2, II. A. 4, interviews with Staff who perform risk assessments and the PREA Coordinator address 115.341 (e).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.341: Screening for risk of victimization and abusiveness.</p>
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115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 9-08 Classification and Housing 2. Policy 5-01 Personal Hygiene Items 3. Admission forms and vulnerability assessments <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Staff who perform risk assessments

3. Detention Manager
4. Medical RN
5. Mental Health
6. Transgender Residents

115.342 (a): The District VI Juvenile Detention Center utilizes the intake information to make decisions on housing assignments. The needs of each resident are taken into consideration. Detention staff indicated they would determine housing on a case-by-case basis and have appropriate facilities available to ensure the safety of all residents. (Policy 9-08 Classification and Housing, page 2, II. B.1.)

115.342 (b): All juveniles shall be assigned to single-occupancy sleeping rooms unless the population at District VI Juvenile Detention Center exceeds the number of available rooms; in such cases, the dormitory will be used as a multiple-occupancy room. Juveniles may only be separated from others during regular activities as a last resort, and only when less restrictive measures are insufficient to ensure the safety of all juveniles. Such separation shall continue only until an alternative method of maintaining safety can be arranged. During any period of separation, the facility shall not deprive juveniles of daily large-muscle exercise or any legally mandated educational or special education services, except in cases where documented behavior or other factors demonstrate that the juvenile poses a danger to others or staff. Juveniles placed in separation under these circumstances must receive daily visits from a medical or mental health care professional. Additionally, juveniles in separation shall have access to other programs and work opportunities to the greatest extent possible. (Policy 9-08 Classification and Housing, page 2, II. B.2-3.)

115.342 (c): LGBTQI residents are not assigned housing or beds based on their orientation. All residents at District VI Juvenile Detention Center are placed in single cells. (Policy 9-08 Classification and Housing, page 2, II. B.4.)

115.342 (d): The PREA Coordinator stated during his interview that the facility would consider a transgender or intersex resident's views concerning safety. More specifically, for youth who identify as transgender or intersex, Mental Health staff would assist in the intake process to ease any challenges perceived by the youth. Preferences concerning housing assignments for LGBTQI youth are always considered. LGBTQI youth receive fair and equal treatment without bias. Mental Health Staff monitors transgender or intersex residents. Any issues concerning residents who may be vulnerable due to their sexual orientation are documented so that supervisors, if necessary, can adjust assignments. (Policy 9-08 Classification and Housing, page 2-3, II. B.5-8.)

115.342 (e): Placement and programming assignment for each transgender or intersex resident would be reassessed at least twice each year. The Auditor notes that the average sentence at the District VI Juvenile Detention Center is less than fifteen days. (Policy 9-08 Classification and Housing, page 2-3, II. B.5-8.)

115.342 (f): The PREA Coordinator stated during his interview that the facility would consider a transgender or intersex resident's views concerning safety. The PREA

Coordinator advised they would house a transgender resident with consideration as to whether the placement will ensure the resident's health and safety. (Policy 9-08 Classification and Housing, page 2-3, II. B.5-8.)

115.342 (g): All residents are provided with the opportunity to shower separately from other residents. (Policy 5-01 Personal Hygiene Items, page 1, II. A.)

115.342 (h) - The facility reported that, within the past twelve months, no residents identified as being at risk for sexual victimization were placed in isolation. The District VI Juvenile Detention Facility consists entirely of single-occupancy cells. In cases where a juvenile is placed in isolation, staff must document both the concerns for the juvenile's safety and the rationale for why alternative methods of separation could not be implemented. (Policy 9-08 Classification and Housing, page 3, II. B.10. a. and b.)

115.342 (i): Staff are mandated to review the status of each resident placed in isolation every thirty days to determine whether continued separation from the general population remains warranted. It should be noted that the Auditor has observed the average length of stay at this facility is less than fifteen days. Typically, observation cells are not utilized for the purpose of isolating residents; rather, these rooms are designated for suicide prevention. Nevertheless, if a juvenile is identified through assessment as having an elevated vulnerability to sexual victimization, that individual, whenever feasible, may be assigned to an observation room or a room in close proximity to the control room to facilitate enhanced supervision. (Policy 9-08 Classification and Housing, page 3, II. B.11.)

Policy 9-08 Classification and Housing, page 2, II. B.1., interviews with the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (a).

Policy 9-08 Classification and Housing, page 2, II. B.2-3., interviews with staff who conduct Risk of Victimization and Abusiveness, Detention Manager Mental Health and Medical RN, addresses 115.342 (b).

Policy 9-08 Classification and Housing, page 2, II. B.4., interview with Transgender Residents and the PREA Coordinator addresses 115.342 (c).

Policy 9-08 Classification and Housing, page 2-3, II. B.5-8., interview with Transgender Residents and the PREA Coordinator, addresses 115.342 (d).

Policy 9-08 Classification and Housing, page 2-3, II. B.5-8., interviews with the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (e).

Policy 9-08 Classification and Housing, page 2-3, II. B.5-8., interviews with Transgender Residents, the PREA Coordinator and staff who conduct Risk of Victimization and Abusiveness addresses 115.342 (f).

Policy 5-01 Personal Hygiene Items, page 1, II. A., interviews with Transgender Residents, the PREA Coordinator and staff who conduct Risk of Victimization and

	<p>Abusiveness addresses 115.342 (g).</p> <p>Policy 9-08 Classification and Housing, page 3, II. B.10. a. and b., addresses 115.342 (h).</p> <p>Policy 9-08 Classification and Housing, page 3, II. B.11., address 115.342 (i).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.342: Use of screening information.</p>
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115.351	Resident reporting
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Information from Education Video 4. PREA Brochure D6JDC 5. PREA Brochure D6JDC Spanish 6. Resident Handbook 7. PREA Direct Care Staff Training 8. Posters information 9. District VI Site Review <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Residents 2. Random Staff 3. PREA Coordinator <p>115.351 (a): There are multiple ways for Residents to report sexual abuse and sexual harassment privately. The PREA Brochure addresses reporting options such as informing a staff member, the director, teacher or medical staff. Completing a report form located in the housing units. Give the form to a detention officer, teacher, medical staff, attorney, or director. Residents are also informed they can tell a parent, prosecuting attorney or anyone they trust. Finally, information posters throughout the facility inform residents they can call the community victim advocate hotline or the National Sexual Assault Hotline and may request to remain</p>

anonymous. (Policy 6-18 Abuse Reporting, pages 1-2, II. A. 1-6)

115.351 (b): Residents can call a community victim advocate hotline and may request to remain anonymous. The phone number is posted throughout the facility. There are no residents detained solely for civil immigration purposes at this facility. (Policy 6-18 Abuse Reporting, pages 1-2, II. A. 1-6)

115.351 (c) – Any suspected case of child abuse/neglect or harassment is to be reported immediately, and notification made through the chain of command. All staff are required to report immediately any knowledge, suspicion, or information they receive regarding an incident of retaliation against residents, or staff who reported sexual abuse or harassment; and any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, harassment or retaliation. This includes reports made verbally, in writing, anonymously, and from third parties. All reported cases of abuse or harassment will be referred to the appropriate investigating authority. Staff shall promptly document all reports. (Policy 6-18 Abuse Reporting, pages 1-2, II. A. 5)

115.351 (d): The PREA Coordinator advised the facility provides writing utensils and writing paper for residents. (Policy 6-18 Abuse Reporting, pages 1, II. A. 3.)

115.351 (e): Staff may report sexual abuse of juveniles at any time to the Director, supervisor or assistant supervisor. Such report will be treated in a strictly confidential manner. Staff may also report directly to the Bannock County Prosecuting Attorney's Office or the Pocatello Police Department. (Policy 6-18 Abuse Reporting, page 4, E.3.)

Resident interviews confirm knowledge of the reporting procedures. Staff interviews confirm knowledge of reporting procedures.

Policy 6-18 Abuse Reporting, pages 1-2, II. A. 1-6, District VI Site Review, interviews with Random Residents and Random Staff addresses 115.351 (a).

Policy 6-18 Abuse Reporting, pages 1-2, II. A. 1-6., District VI Site Review, interviews with PREA Coordinator and Random Residents addresses 115.351(b).

Policy 6-18 Abuse Reporting, pages 1-2, II. A. 5., PREA Brochure D6JDC, PREA Brochure D6JDC Spanish, interviews with Random Staff and Random Inmate addresses 115.351(c).

Policy 6-18 Abuse Reporting, pages 1, II. A. 3., PREA Brochure D6JDC, PREA Brochure D6JDC Spanish, interview with PREA Coordinator addresses 115.351(d).

Policy 6-18 Abuse Reporting, page 4, E.3., and interviews with Random Staff addresses 115.351(e).

The District VI Juvenile Detention Center complies with Standard 115.351: Resident reporting.

115.352	Exhaustion of administrative remedies
	<p data-bbox="279 185 981 219">Auditor Overall Determination: Meets Standard</p> <p data-bbox="279 264 564 297">Auditor Discussion</p> <p data-bbox="279 342 443 376">Documents</p> <ol data-bbox="341 443 1102 600" style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Policy 7-03 Grievance Procedure 4. Policy 7-01 Rules, Discipline Juvenile Handbook <p data-bbox="279 645 1476 757">115.352 (a): The District VI Juvenile Detention Center has administrative procedures to address resident grievances regarding sexual abuse. (Policy 7-03 Grievance Procedure)</p> <p data-bbox="279 801 1476 1003">115.352 (b): There shall be no restriction on the timeframe within which grievances, reports, or allegations of abuse may be submitted. Residents filing a grievance are not required to participate in, nor will they be subject to any informal grievance procedures or informal resolution processes concerning any alleged incident of abuse. (Policy 7-03 Grievance Procedure, page 2, D.1 and 3.)</p> <p data-bbox="279 1048 1476 1249">115.352 (c): A resident who reports an allegation of sexual abuse may submit a grievance through the established process by placing it in an envelope addressed to the Director, thereby ensuring that the grievance is not delivered to or reviewed by the staff member who is the subject of the complaint. (Policy 6-18 Abuse Reporting, Page 2, II. 6.)</p> <p data-bbox="279 1294 1476 1821">115.352 (d): Within ninety days of the submission of a grievance related to abuse, the District VI Juvenile Detention Center shall render a final determination regarding the validity of the grievance. The period during which the resident prepares an administrative appeal shall not be included in the calculation of the ninety-day timeframe. Should the standard period prove insufficient for reaching an appropriate decision, the District VI Juvenile Detention Center may extend the deadline by up to seventy days. In such cases, the juvenile must be notified in writing, and the notification must indicate the specific date by which the final decision will be provided. If the resident does not receive a response within the established timeframe, the grievance shall be considered denied. Nevertheless, except in circumstances where good cause exists, the District VI Juvenile Detention Center shall make every effort to issue a written decision and respond to all grievances within the prescribed period. (Policy 7-03 Grievance Procedure, pages 2-3, D.4)</p> <p data-bbox="279 1865 1476 2056">115.352 (e): Third parties, including fellow residents, staff members, family members, attorneys, external advocates, and others—are authorized to assist residents in submitting reports, allegations, grievances, and requests for administrative remedies related to allegations of sexual abuse. Additionally, such parties are permitted to submit these requests on behalf of residents. If a third</p>

party, other than a parent or legal guardian, files a request on behalf of a resident, the facility may require, as a condition for processing the request, that the alleged victim consent to having the request submitted on their behalf. Furthermore, the facility may require the alleged victim to personally complete any subsequent steps in the administrative remedy process. Should the resident choose not to have the request processed on their behalf, the agency shall document the resident's decision. In cases where a parent or legal guardian submits a request or appeal on behalf of a resident, District VI Juvenile Detention Center shall process the request or appeal regardless of whether the juvenile consents to having the request filed on their behalf. (Policy 6-18 Abuse Reporting, page 4-5, F.)

115.352 (f): Upon receipt of any grievance or report of allegation under this section, District VI Juvenile Detention Center staff shall immediately implement all necessary measures to ensure the resident is protected from further abuse, harassment, or retaliation. Should a juvenile communicate an urgent need for protection from abuse, harassment, or retaliation—or if the agency becomes aware that a resident faces a substantial risk of imminent sexual abuse—any District VI Juvenile Detention Center staff member is authorized and required to respond promptly, prioritizing the juvenile's safety above all other responsibilities until initial protective actions are completed as part of the facility's immediate response. Within five days, the District VI Juvenile Detention Center shall issue and document a final determination regarding whether the resident is deemed to be at substantial risk of imminent sexual abuse, as well as the actions taken in response to the emergency grievance. (Policy 7-03 Grievance Procedure, pages 2, D.2)

115.352 (g): Failure to adhere to the District VI regulations following regulations may result in room confinement for up to twenty-four (24) hours. These regulations include, but are not limited to, any form of sexual harassment or flirtatious behavior directed toward other residents or staff members. The facility maintains a zero-tolerance policy regarding rape and sexual misconduct. Sexual misconduct is defined as engaging in conversations or making remarks of a sexual nature, as well as any inappropriate physical contact with another individual. Residents are required to report any incidents of sexual misconduct to staff members immediately. Reports or grievances regarding sexual abuse or harassment should only be filed when there is a legitimate concern; the District VI Juvenile Detention Center may take action if it is determined that a report or grievance was submitted in bad faith. (Policy 7-01 Rules, Discipline Juvenile Handbook, pages 2-3, C. k and l)

Over the past twelve months, the facility has not received any grievances alleging sexual abuse. Additionally, there have been no third-party grievances or emergency grievances submitted within this period. Furthermore, there have been no instances where a grievance alleging sexual abuse resulted in disciplinary action against a resident for submitting the grievance in bad faith.

Policy 7-03 Grievance Procedure addresses 115.352 (a).

Policy 7-03 Grievance Procedure, page 2, D.1 and 3., addresses 115.352 (b).

Policy 6-18 Abuse Reporting, Page 2, II. 6., addresses 115.352 (c).

	<p>Policy 7-03 Grievance Procedure, pages 2-3, D.4, addresses 115.352 (d).</p> <p>Policy 6-18 Abuse Reporting, page 4-5, F., addresses 115.352 (e).</p> <p>Policy 7-03 Grievance Procedure, pages 2, D.2, addresses 115.352 (f).</p> <p>Policy 7-01 Rules, Discipline Juvenile Handbook, pages 2-3, C. k and l., addresses 115.352 (g).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.352 Exhaustion of Administrative Remedies.</p>
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115.353	Resident access to outside confidential support services and legal representation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 8-03 Telephone 3. Policy 8-05 Visitation 4. Policy 8-08 Mail 5. MOU Family Services Alliances 6. District VI Site Review <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Residents 2. Detention Manager 3. PREA Coordinator 4. Family Services Alliance <p>Section 115.353(a): The District VI Juvenile Detention Center has established a Memorandum of Understanding with the Family Services Alliance to offer confidential emotional support services to residents affected by sexual abuse. Residents are provided with access to victim advocates through posted phone numbers that are not monitored, including free, 24-hour hotlines for the Family Services Alliance Sexual Assault Crisis Line at (208) 251-4357 and the National Sexual Assault Hotline at 1-800-656-4673. Those detained solely for civil immigration reasons are permitted to call the National Sexual Assault Hotline.</p>

Informational posters are displayed in the phone area, detailing the extent of monitoring for calls and clarifying how reports of abuse are forwarded to authorities in line with mandatory reporting laws. Guidelines ensuring reasonable and confidential access to legal counsel and family members after an alleged sexual abuse incident are outlined in Policies 8-03, 8-05, and 8-08. (Policy 2-18 Prison Rape Elimination Act Procedures, pages 11-12 C. 1-2)

115.353(b): Informational posters are displayed in the phone area, explaining how calls may be monitored and specifying how reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. (Policy 2-18 Prison Rape Elimination Act Procedures, page 12 C. 3)

115.353 (c): The District VI Juvenile Detention Center has established an agreement with the Family Services Alliance to offer support services for issues related to sexual assault. Residents are provided with the mailing address and phone numbers, including a toll-free line, for confidential communication with the Center. The facility's Mental Health Clinician assists residents in connecting with external victim advocates to receive emotional support services pertaining to sexual abuse. Residents are able to access community-based victim advocacy programs. Family Services Alliance delivers a range of resources, support, and crisis intervention for individuals impacted by domestic and sexual violence, stalking, and human trafficking. Their programs feature a 24-hour crisis hotline, emergency shelter, legal advocacy, counseling, sexual assault response, prevention education, family advocacy, and support for children affected by violence. All services provided by Family Services Alliance are free of charge and strictly confidential. (MOU Family Services Alliance)

115.353(d): Residents are encouraged to spend time with their families as often as possible. Residents can call their parents, guardians, foster families, or caretakers using collect calls. They can also connect with their attorneys through in-person visits or phone calls. (Policy 8-03 Telephone, Policy 8-05 Visitation, Policy 8-08 Mail)

All residents interviewed indicated they had confidential access to their attorneys before any hearings. Additionally, all residents interviewed stated they are allowed the opportunity to visit with family.

Policy 2-18 Prison Rape Elimination Act Procedures, pages 11-12 C. 1-2., District VI Site Review, and interviews with Random Residents addresses 115.353 (a).

Policy 2-18 Prison Rape Elimination Act Procedures, page 12 C. 3., and interviews with Random Residents addresses 115.353 (b).

MOU Family Services Alliances and interview with Family Services Alliance Advocate addresses 115.353 (c).

Policy 8-03 Telephone, Policy 8-05 Visitation, Policy 8-08 Mail, interviews with Detention Manager, PREA Coordinator and Random Residents, address 115.353 (d).

The District VI Juvenile Detention Center complies with Standard 115.353: Resident

	access to outside confidential support services.
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115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 6-18 Abuse Reporting 2. District VI Site Review 3. District VI Web page information <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Residents <p>115.354 (a): Third parties, including fellow residents, staff members, family members, attorneys, external advocates, and others—are authorized to assist residents in submitting reports, allegations, grievances, and requests for administrative remedies concerning claims of sexual abuse. Additionally, these parties may submit such requests on behalf of residents. If a third party, other than a parent or legal guardian, files a request on behalf of a resident, the facility may require that the alleged victim consents to having the request filed in his or her name and may also require the alleged victim to personally continue with any subsequent steps in the administrative remedy process. Should the resident choose not to have the request processed on his or her behalf, the agency will document the resident’s decision. In cases where a parent or guardian submits a request or appeal on behalf of a resident, the District VI Juvenile Detention Center will process the request or appeal regardless of the juvenile’s agreement to have the request filed. The District VI Juvenile Detention Center has established procedures for receiving third-party reports of sexual abuse, and related information is available on the District VI website https://www.bannockcounty.us/juvenile-detention/. The public is provided with guidance on how to report incidents of sexual abuse or harassment on behalf of residents. Interviews with residents demonstrate a clear understanding of the procedures for third-party reporting. Most residents indicated confidence that they could inform their attorney, family member, or probation officer, and that those individuals could then contact facility staff or the Director to report an incident. (Policy 6-18 Abuse Reporting, page 4-5, F.)</p> <p>Policy 6-18 Abuse Reporting, page 4-5, F., District VI Site Review, District VI Web page information, and interviews with Random Residents, addresses 115.354 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.354: Third-party reporting.</p>

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115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 6-18 Abuse Reporting 2. 16-1605 Idaho State Code <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Mental Health 3. Medical RN 4. PREA Coordinator 5. Random Staff <p>115.361 (a): All staff at the District VI Juvenile Detention Center are required to promptly report any knowledge, suspicion, or information related to incidents of sexual abuse or sexual harassment within the facility. Staff must also report any acts of retaliation against residents or staff who have reported such incidents. No matter how the information is obtained, any employee, contractor, or volunteer who becomes aware of or observes resident-on-resident sexual misconduct, or who has reasonable cause to believe a resident may be a victim of sexual misconduct, must immediately report this information or incident to their immediate supervisor. If the situation involves alleged criminal conduct, the Director will notify law enforcement authorities. Additionally, supervisory staff, mental health staff, or medical personnel are responsible for reporting any suspected child abuse or neglect to Child Protective Services. (Policy 6-18, Abuse Reporting, page 4, E.1.)</p> <p>115.361 (b): All staff members, contractors, and volunteers at the District VI Juvenile Detention Center are required to report any allegations of sexual abuse in accordance with mandatory reporting laws. (Idaho State Code 16-1605, Policy 6-18, Abuse Reporting, page 4, E.1.)</p> <p>115.361 (c): In addition to reporting to designated supervisors, officials, and state or local service agencies, staff at the District VI Juvenile Detention Center are strictly prohibited from disclosing any information pertaining to a sexual abuse report to individuals other than those who require such information for the purposes of treatment, investigation, or making decisions related to security and facility management. (Policy 6-18, Abuse Reporting, pages 5-6 H.1.)</p>

	<p>115.361 (d): Medical and Mental Health practitioners must report sexual abuse to designated Supervisors and state or local agencies. (Idaho State Code 16-1605, Policy 6-18, Abuse Reporting, pages 5-6 H.2.)</p> <p>115.361 (e): The Detention Manager is required to promptly notify the alleged victim's parents or legal guardians of any allegation of sexual abuse, except in cases where official documentation exists indicating that such notification is not permitted. If the alleged victim is under the guardianship of the child welfare system, the Detention Manager must report the allegation of sexual abuse to the victim's assigned caseworker rather than to the parents or legal guardians. (Policy 6-18, Abuse Reporting, page 6 I. 1-3.)</p> <p>115.361 (f): All allegations of sexual abuse, including those reported by third parties or submitted anonymously, shall be promptly referred to the Bannock County Prosecuting Attorney's Office and the Bannock County Sheriff's Office, which serve as the designated investigative authorities for the District VI Juvenile Detention Center. (Policy 6-18, Abuse Reporting, page 6 J.)</p> <p>Any Detention Center employee, contractor, or volunteer who fails to report an allegation or coerces or threatens another person to submit inaccurate, incomplete, or untruthful information with the intent to alter a report, may face disciplinary action up to and including termination of employment.</p> <p>Policy 6-18, Abuse Reporting, page 4, E.1. and interviews with Random staff addresses 115.361 (a).</p> <p>Policy 6-18, Abuse Reporting, page 4, E.1., Idaho State Code 16-1605, and interviews with Random staff addresses 115.361 (b).</p> <p>Policy 6-18, Abuse Reporting, pages 5-6 H.1., and interviews with Random Staff addresses 115.361 (c).</p> <p>Policy 6-18, Abuse Reporting, pages 5-6 H.2., Idaho State Code 16-1605, interview with Medical and Mental Health staff addresses 115.631 (d).</p> <p>Policy 6-18, Abuse Reporting, page 6 I. 1-3., interviews with PREA Coordinator and Detention Manager addresses 115.361 (e).</p> <p>Policy 6-18, Abuse Reporting, page 6 J., and the interview with the Detention Manager addresses 115.361 (f).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.361: Staff and Agency reporting duties.</p>
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115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Documents</p> <ol style="list-style-type: none"> 1. Policy 7-03 Grievance Procedure <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Agency Head 3. Random Staff <p>115.362 (a): The District VI Juvenile Detention Center maintains a policy that mandates immediate action to safeguard residents from sexual abuse. Staff members interviewed demonstrated a clear understanding of their reporting obligations and the necessary procedures to ensure resident safety. All staff, volunteers, and contractors who receive an initial report of sexual misconduct are required to promptly intervene on behalf of the alleged victim, ensuring that the individual receives timely medical and mental health care, as appropriate to the circumstances and the victim's needs.</p> <p>Interviews with staff revealed that personnel have received formal training and possess a comprehensive understanding of procedures to protect residents who may be at risk of imminent sexual abuse. Upon being informed that a resident is exposed to a substantial risk of imminent sexual abuse, detention center staff indicated that immediate measures would be implemented. At a minimum, modifications to housing or programming would be undertaken to separate or mitigate the threat between residents. Responses from all randomly interviewed staff were consistent with this approach. In his interview, the Detention Manager confirmed that facility staff would follow an established plan of action designed to immediately eliminate the risk. The protection of the alleged victim would be prioritized, and decisions regarding housing or educational assignments would be determined based on the specifics of each incident. (Policy 7-03 Grievance Procedure, page 2. D.2.a)</p> <p>Policy 7-03 Grievance Procedure, page 2. D.2.a., interviews with Random Staff and the Detention Manager address 115.362 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.362: Agency protection duties.</p>
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115.363	Reporting to other confinement facilities
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	<div data-bbox="280 118 983 152">Auditor Overall Determination: Meets Standard</div> <div data-bbox="280 197 564 230">Auditor Discussion</div> <div data-bbox="280 275 443 309"><p>Documents</p></div> <div data-bbox="341 376 695 409"><p>1. 6-18 Abuse Reporting</p></div> <div data-bbox="280 454 427 488"><p>Interviews</p></div> <div data-bbox="341 555 663 633"><p>1. Detention Manager 2. Agency Head</p></div> <div data-bbox="280 667 1445 1081"><p>115.363 (a): When an allegation is received that a resident was sexually abused while confined at another facility, the District VI Juvenile Detention Center’s policy mandates that the head of the facility and the appropriate law enforcement authorities be notified within 72 hours. This notification must be formally documented. Should an allegation arise indicating that a resident was sexually abused prior to admission while confined at any other facility, the Supervisor on duty or the Director is responsible for notifying both the head of the implicated facility or the relevant office of the agency where the alleged abuse occurred, as well as the appropriate investigative agency for that facility. (Policy 6-18 Abuse Reporting, pages 2-3, C.2)</p></div> <div data-bbox="280 1115 1425 1238"><p>115.363 (b): Such notification shall be provided as soon as possible but no later than 72 hours after receiving the allegation. (Policy 6-18 Abuse Reporting, pages 2-3, C.2.c.)</p></div> <div data-bbox="280 1272 1465 1563"><p>115.363 (c): Staff are required to formally record all relevant information, including but not limited to the date and time of communications with both the Agency and the investigative entity; the names of individuals contacted in relation to the allegation; the specific details shared with the Agency and investigative body; and must also arrange a follow-up appointment for the juvenile with an appropriate medical or mental health professional. (Policy 6-18 Abuse Reporting, pages 2-3, C.2.d and e.)</p></div> <div data-bbox="280 1597 1477 1966"><p>115.363 (d): Detention Center personnel are required to promptly report any suspected incidents of child abuse, neglect, or harassment through the established chain of command. Additionally, staff must report any information pertaining to retaliation against individuals who have reported sexual abuse or harassment, as well as any staff negligence that may have contributed to such incidents. Reports may be submitted verbally, in writing, anonymously, or by third parties. All cases shall be referred to the appropriate investigative authority, and staff must ensure that all reports are documented without delay. (Policy 6-18 Abuse Reporting, page 3, D)</p></div> <div data-bbox="280 2000 1477 2078"><p>During the past year, the facility did not receive any allegations that a resident was abused while housed at another facility. Additionally, there were no reports of sexual</p></div>
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	<p>abuse received from other facilities within the past 12 months.</p> <p>Policy 6-18 Abuse Reporting, pages 2-3, C.2., addresses 115.363 (a).</p> <p>Policy 6-18 Abuse Reporting, pages 2-3, C.2.c., addresses 115.363 (b).</p> <p>Policy 6-18 Abuse Reporting, pages 2-3, C.2.d and e., addresses 115.363 (c).</p> <p>Policy 6-18 Abuse Reporting, page 3, D., interviews with the Agency Head and the Detention Manager addresses 115.363 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.363: Reporting to other confinement facilities.</p>
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115.364	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Supervisor Checklist PREA <p>Interviews</p> <ol style="list-style-type: none"> 1. Random Staff <p>115.364 (a): Interviews conducted with staff members at the District VI Juvenile Detention Center regarding first responder responsibilities demonstrate that personnel possess a clear understanding of their obligations in this area. Staff articulated the necessity of immediately separating the victim from the alleged perpetrator, preserving and securing the crime scene, instructing the victim to refrain from actions that could compromise evidence, and, when feasible, ensuring the alleged perpetrator does not engage in conduct that might jeopardize evidentiary integrity. Additionally, personnel recognized the importance of promptly notifying their supervisor, who is then responsible for contacting the Detention Manager. Staff confirmed that they have received training encompassing the duties of a first responder. Medical and Mental Health staff also indicated awareness of</p>

	<p>their respective roles as first responders and the requirement to inform security staff.</p> <p>A first responder must: separate the alleged victim and perpetrator; preserve and protect the crime scene; request that the alleged victim refrain from destroying evidence; and ensure the alleged perpetrator does not destroy evidence. (Policy 2-18 Prison Rape Elimination Act Procedures, page 12 VI. B.)</p> <p>115.364 (b): A non-security staff responder must first request the victim not destroy evidence and then notify a detention staff member. (Policy 2-18 Prison Rape Elimination Act Procedures, page 13 VI. B.2.)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 12 VI. B., Supervisor Checklist PREA, and interviews with random staff addresses 115.364 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 13 VI. B.2., and interviews with random staff addresses 115.364 (b).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.364: Staff first responder duties.</p>
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115.365 Coordinated response	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Supervisor Checklist PREA <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Random Staff <p>115.365 (a): The District VI Juvenile Detention Center maintains a comprehensive written protocol that mandates immediate notification of the Detention Manager, PREA Coordinator, Bannock County Sheriff's Office Police Department, and sexual assault advocacy organizations in the event of a sexual assault incident. According to the Detention Manager's interview, staff members receive training to follow the Supervisor Checklist, which encompasses—but is not limited to—the separation of involved individuals, notification of law enforcement, preservation of evidence</p>

	<p>integrity, and prompt communication with the PREA Coordinator as well as medical and mental health personnel.</p> <p>The Center's response to a sexual assault incident prioritizes the provision of mental health and medical support to the alleged victim at the earliest opportunity. Procedures require the separation of the alleged victim from the alleged perpetrator, the identification and isolation of witnesses, and the securing of the incident scene to prevent the removal or introduction of items. Only designated investigators are permitted to access the scene.</p> <p>First responder training includes directives to separate the alleged victim and abuser, preserve and safeguard the crime scene until evidence collection can occur, and advise both parties against actions that could compromise physical evidence, such as brushing teeth, washing, urinating, defecating, drinking, or eating. Witnesses are to be isolated, law enforcement must be notified, and the alleged victim is to be referred to medical and mental health. First responders are required to prepare a report for every incident, regardless of its origin, detailing observations at the time of response, the date and time of the incident, the date and time of the report, and the identity of the individual who initially reported the allegation. (Policy 2-18 Prison Rape Elimination Act Procedures, page 13, C., Policy 6-18 Abuse Reporting, page 3-4, D., Supervisor Checklist PREA)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 13, C., Policy 6-18 Abuse Reporting, page 3-4, D., Supervisor Checklist PREA and the interview with the Detention Manager and Random staff addresses 115.365 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.365: Coordinated response.</p>
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115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <p>1. Policy 2-18 Prison Rape Elimination Act Procedures</p> <p>Interviews</p>

	<p>1. Agency Head</p> <p>PREA 115.366 (a) – The District VI Juvenile Detention Center does not engage in collective bargaining. Neither the Center nor any governmental entity acting on its behalf in matters of collective bargaining shall enter or renew any collective bargaining agreement, or any other agreement, that would restrict the agency’s authority to remove alleged sexual abusers from contact with residents while an investigation is ongoing or a determination regarding disciplinary action is being made. (Policy 2-18 Prison Rape Elimination Act Procedures, page 13, D.1)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 13, D.1, and interview with the Agency Head, addresses 115.366 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.366 - Preservation of ability to protect residents from contact with abusers.</p>
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115.367	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <p>1. Policy 2-18 Prison Rape Elimination Act Procedures</p> <p>Interviews</p> <p>1. Agency Head 2. Detention Manager 3. Staff who monitor retaliation</p> <p>115.367 (a): The District VI Juvenile Detention Center strictly prohibits any form of retaliation against residents and staff members who report incidents of sexual abuse or sexual harassment, or who assist in related investigations. Facility leadership is responsible for monitoring the conduct and treatment of individuals who have either reported sexual abuse or cooperated with investigations, for a minimum period of 90 days following their report or cooperation. (Policy 2-18 Prison Rape Elimination Act Procedures, page 13, E)</p>

	<p>115.367 (b): Multiple protection measures are available, including removal of alleged Staff and alleged resident abusers, housing changes and advocate support. (Policy 2-18 Prison Rape Elimination Act Procedures, page 14, E. 2.)</p> <p>115.367 (c): Monitoring may extend for a minimum of 90 days and encompasses regular status evaluations. Detention Center staff are required to respond swiftly to address any instances of retaliation. The Detention Manager stated that disciplinary reports, requests for housing or program changes, unfavorable performance evaluations, or staff reassignments would be reviewed to determine the necessity for continued monitoring. (Policy 2-18 Prison Rape Elimination Act Procedures, page 14 E. 1. a. and b.)</p> <p>115.367 (d): Monitoring of residents included periodic status checks. (Policy 2-18 Prison Rape Elimination Act Procedures, page 14 E.1.a.1)</p> <p>115.367 (e): If any person who assists with an investigation communicates concerns about possible retaliation, the District VI Detention Manager would take suitable measures to safeguard that individual from retaliatory actions. . (Policy 2-18 Prison Rape Elimination Act Procedures, page 14. E.3.)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 13, E., addresses 116.367 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 14, E. 2. interviews with Staff who monitor retaliation Agency Head and the Detention Manager addresses 115.367 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 14 E. 1. a. and b., interviews with Staff who monitor retaliation and the Detention Manager addresses 115.367 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 14 E.1.a.1., and interview with Designated Staff who monitor retaliation addresses 115.367 (d).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 14 E.3, interview with the Agency Head and the Detention Manager addresses 115.367 (e).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.367: Agency protection against retaliation.</p>
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115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 9-08 Classification and Housing <p>Interviews</p> <ol style="list-style-type: none"> 1. Detention Manager 2. Medical RN 3. Mental Health <p>115.368 (a): During the preceding twelve months, the facility reported that no residents identified as being at risk for sexual victimization were placed in isolation. The District VI Juvenile Detention Facility is comprised solely of single-occupancy cells. In instances where a juvenile is placed in isolation, staff are required to document both the safety concerns for the juvenile and the justification for not employing alternative methods of separation. Additionally, staff must conduct a review of each resident's isolation status every thirty days to assess whether continued separation from the general population is necessary. It is important to note that the Auditor has observed an average length of stay at this facility of less than fifteen days. Observation cells are generally reserved for suicide prevention and are not typically used for the purpose of isolating residents. Nonetheless, if an assessment indicates that a juvenile has increased vulnerability to sexual victimization, that individual may, when practicable, be assigned to an observation room or a room located near the control room to ensure heightened supervision. (Policy 9-08 Classification and Housing, pages 2-3, II. B)</p> <p>Policy 9-08 Classification and Housing, pages 2-3, II. B, interviews with the Detention Manager, Medical RN and Mental Health Staff addresses 115.368 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.368: Post-allegation protective custody.</p>
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115.371	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. Idaho Sexual Assault Response Guidelines

4. Investigator and Prosecutor Training
5. Section 31-2607 Ido State Legislature
6. Uniform Evidence protocol Idaho State Police

115.371 (a): The District VI Juvenile Detention Center does not conduct its own investigation into allegations of sexual abuse and sexual harassment. (Policy 6-18 Abuse Reporting, page 3 D. 2. and 3.)

115.371 (b): The Detention Manager coordinates administrative and criminal investigations of alleged incidents of sexual misconduct as directed by the Bannock County Sheriff's Office and the Bannock County Prosecuting Attorney's Office. The Bannock County Sheriff's Office conducts criminal sexual abuse investigations, while the Bannock County Prosecuting Attorney's Office conducts administrative investigations. (Policy 6-18 Abuse Reporting, page 3 D., and Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2.) The Investigators have received training in conducting investigations in confinement settings. (Investigator and Prosecutor Training) The training includes the proper use of Miranda and Garrity warnings, evidence collection, and the criteria and evidence required to substantiate a case for administrative action or criminal referral. (Idaho Sexual Assault Response Guidelines and Uniform Evidence Protocol Idaho State Police)

115.371 (c): Evidence collection and reporting options are detailed in Idaho Sexual Assault Response Guidelines, page 15-16 and Uniform Evidence protocol Idaho State Police. In instances where allegations of sexual abuse arise, investigative responsibilities are delegated to the Bannock County Sheriff's Office in accordance with established departmental policies and procedures. This includes the systematic collection and preservation of all pertinent direct and circumstantial evidence, inclusive of physical and DNA evidence and electronic monitoring data when available, the conduct of interviews with alleged victims, suspected perpetrators, and witnesses.

115.371 (d): The District VI Juvenile Detention Center will not ask the investigating agency to end an investigation because the individual who made the allegation withdraws or recants their claim. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, D.1.)

115.371 (e): The District VI Juvenile Detention Center shall provide full cooperation throughout all investigative proceedings and shall participate in investigative activities as directed by the principal investigative agency, including the facilitation of compelled interviews as instructed by the Bannock County Prosecuting Attorney's Office or the Bannock County Human Resources Department, provided that such compelled interviews do not compromise the integrity of potential subsequent criminal prosecutions where evidentiary standards warrant such action. (Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. 3.)

115.371 (f): The assessment of credibility for alleged victims, suspects, or witnesses is conducted on a case-by-case basis, without regard to their classification as an in-custody juvenile or staff member. Additionally, it is expressly prohibited to require

any juvenile alleging sexual abuse to undergo polygraph testing or any other truth-verification procedure as a prerequisite for the continuation of an investigation into such allegations. (Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. A. 2. e and f.)

115.371 (g): Administrative investigations shall be conducted by the Bannock County Prosecuting Attorney's Office. District VI Juvenile Detention Center will cooperate fully with administrative investigations. District VI Juvenile Detention Center will participate in any investigative process involving administrative investigations only as directed by the Bannock County Prosecuting Attorney's Office. Such administrative investigations will include but not be limited to the following items: an effort to determine whether staff actions or failures to act contributed to abuse, written descriptions of the physical and testimonial evidence, documentation of the reasoning behind credibility assessments, and investigative facts and findings. (Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. B. 1-3.)

115.371 (h): Criminal investigations shall be comprehensively documented in formal written reports, which shall include detailed accounts of all physical, testimonial, and documentary evidence, with copies of all relevant documentary materials appended when practicable. (Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. A. 4.)

115.371 (i): Substantiated allegations of conduct that appear to be criminal will be referred to the Bannock County Prosecuting Attorney's Office for prosecution. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16, VII. B. 3.)

115.371 (j): All written reports received by the District VI Juvenile Detention Center as a result of criminal or administrative investigations pertaining to allegations or grievances of sexual abuse shall be retained for a minimum duration of seven (7) years beyond the affected juvenile's eighteenth (18th) birthday. Reports concerning investigations of sexual abuse perpetrated by staff members shall be forwarded to the Bannock County Human Resources Department for inclusion in the pertinent personnel file, with such files maintained for no less than ten (10) years following the termination date of the staff member in question. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16, VII. C. 1. and 2.)

115.371 (k): The investigation will not be discontinued because the alleged abuser or victim is no longer employed by or under the jurisdiction of the District VI Juvenile Detention Center. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, D. 2.)

115.371 (m): Subject to the discretion of the investigating agency, the District VI Juvenile Detention Center shall be kept informed of both the progress and final determinations of any investigation. The extent to which the District 6 Juvenile Detention Center may be apprised of the status of the investigation shall be determined by the investigating agency. The District VI Juvenile Detention Center shall provide full cooperation throughout all investigative proceedings and shall participate in investigative activities as directed by the principal investigative agency. (Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII., A.g. and

	<p>3.)</p> <p>Policy 6-18 Abuse Reporting, page 3 D. 2. and 3 addresses 115.371(a). Not Applicable</p> <p>Policy 6-18 Abuse Reporting, page 3 D., Policy 2-18 Prison Rape Elimination Act Procedures, page 10, D. 1 and 2., Idaho Sexual Assault Response Guidelines, Uniform Evidence Protocol Idaho State Police, and Investigator and Prosecutor Training addresses 115.371(b).</p> <p>Idaho Sexual Assault Response Guidelines, page 15-16, Uniform Evidence protocol Idaho State Police and Investigator and Prosecutor Training, addresses 115.371(c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, D.1., addresses 115.371(d).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. 3., address 115.371(e).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. A. 2. e and f., addresses 115.371(f).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. B. 1-3., addresses 115.371(g).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII. A. 4., addresses 115.371(h).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 16, VII. B. 3., address 115.371(i).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 16, VII. C. 1. and 2., addresses 115.371(j).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, D. 2., addresses 115.371(k).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 15, VII., A.g. and 3., addresses 115.371(m).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.371: Criminal and administrative agency investigations.</p>
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <p>1. Policy 2-18 Prison Rape Elimination Act Procedures</p> <p>115.372 (a): For administrative investigations, the District VI Juvenile Detention Center and the Bannock County Prosecuting Attorney's Office shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16, B.4.)</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 16, B.4., addresses 115.372 (a).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.372: Evidentiary standard for administrative.</p>

115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <p>1. Policy 2-18 Prison Rape Elimination Act Procedures</p> <p>Interviews:</p> <p>1. Detention Manager</p> <p>115.373 (a): Residents are notified of investigation results. After investigating a resident's sexual abuse allegation, the resident will be informed whether the claim is substantiated, unsubstantiated, or unfounded. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16 D.1.)</p> <p>115.373 (b): The District VI Juvenile Detention Center would request information from the investigative agency to inform the resident. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.1. a.)</p>

115.373 (c): After a resident alleges sexual abuse by a staff member, the District VI Juvenile Detention Center will inform them of whether the staff member works in their unit, the staff member's employment status, any indictments, or convictions. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.2.)

115.373 (d): After a resident alleges sexual abuse by another resident, the agency must inform the alleged victim whenever it learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. Additionally, if the alleged abuser is a resident, the resident victim must be informed of the indictment or conviction. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.3.)

115.373 (e): All notifications are documented. (Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.4.)

Following the completion of a criminal investigation, the Detention Manager will notify the victim as deemed appropriate and will document the notification process. Residents will be informed of the outcome of their allegation, specifically whether it has been substantiated, unsubstantiated, or determined to be unfounded. The District VI Juvenile Detention Center will obtain pertinent information from the investigative agency to ensure the resident is adequately informed. In cases where a resident alleges sexual abuse by a staff member, the Detention Center will inform the resident whenever the staff member is no longer employed at the facility, or if the agency learns that the staff member has been indicted or convicted on a sexual abuse charge related to the facility. Similarly, when an allegation involves sexual abuse between residents, the District VI Juvenile Detention Center will notify the resident if the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility. All efforts to provide notifications will be thoroughly documented.

The facility has reported investigations of resident sexual abuse in the past 12 months.

Policy 2-18 Prison Rape Elimination Act Procedures, page 16 D.1., and the interview with the Detention Manager addresses 115.373(a).

Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.1. a., addresses 115.373(b).

Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.2. and the interview with the Detention Manager addresses 115.373(c).

Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.3. and the interview with the Detention Manager addresses 115.373(d).

Policy 2-18 Prison Rape Elimination Act Procedures, page 16. D.4., and the interview with the Detention Manager address 115.373(e).

The District VI Juvenile Detention Center complies with Standard 115.373: Reporting to residents.

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115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. 18-6110 Idaho State Code <p>115.376 (a): Any staff member of the District VI Juvenile Detention Center who is determined to have engaged in sexual abuse shall be subject to termination. Furthermore, any instance of sexual abuse of a resident by staff constitutes a violation of Idaho Code 18-6110 and will be referred to the appropriate authorities for criminal prosecution. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 1.)</p> <p>115.376 (b): Termination shall be the presumptive disciplinary sanction for Staff engaged in sexual abuse. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 1.)</p> <p>115.376 (c): Any District VI Juvenile Detention Center staff member determined to have engaged in sexual harassment of residents, fellow staff, visitors, or contractors shall be subject to disciplinary sanctions. These sanctions will be proportionate to the nature and circumstances of the misconduct, the staff member's disciplinary history, and the penalties issued for similar offenses by other staff members with comparable records. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 2.)</p> <p>115.376 (d): All terminations, including those resulting from violations of the District VI Juvenile Detention Center's sexual abuse or sexual harassment policies, as well as resignations by staff members who would have been subject to termination had they not resigned, will be formally reported to the Idaho Peace Officers Standards and Training. The report shall include the reason for separation and all supporting documentation. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 3.)</p> <p>Any employee of the District VI Juvenile Detention Center found to have engaged in</p>

	<p>sexual abuse shall be subject to termination and reported for criminal prosecution pursuant to Idaho Code 18-6110. Instances of sexual harassment committed by staff will result in disciplinary action, determined by the severity of the misconduct, the staff member's disciplinary history, and sanctions imposed in similar cases.</p> <p>During the previous 12 months, there have been no reported violations of sexual abuse or sexual harassment policies by staff, nor have there been any terminations or resignations in lieu of termination for such conduct. Disciplinary sanctions for violations of policy, excluding active sexual abuse, are proportionate to the specific nature of the infraction and the employee's record. No staff members received disciplinary measures for such violations within the past year.</p> <p>Any disciplinary actions, or resignations to avoid termination, related to sexual abuse or harassment are reported to law enforcement authorities unless the conduct is clearly non-criminal, and are also reported to the appropriate licensing agencies. All employees, volunteers, and contractors are required to understand that the department strictly prohibits any sexual relationship with individuals under departmental supervision. Such relationships are considered a serious breach of professional conduct and will not be tolerated.</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 1., addresses 115.376 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 1., addresses 115.376 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 2., addresses 115.376 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. A. 3., addresses 115.376 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.376: Disciplinary sanctions for Staff.</p>
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115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures

Interviews:

1. Detention Manager

115.377 (a): Any contractor or volunteer who engages in acts of sexual abuse shall be barred from accessing the District VI Juvenile Detention Center and will be reported to law enforcement authorities for potential criminal prosecution, as well as to the appropriate licensing agencies. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. B.1.)

115.377 (b): Contractors or volunteers who are determined to have violated the Detention Center's PREA policies shall be prohibited from having any contact with residents. In instances where the allegation involves a volunteer or an individual not directly employed by the Juvenile Detention Center (contractor), the Director or designated representative will be notified immediately. The Director will then contact the individual's supervisor, and the individual's access to the facility will be restricted. All allegations of abuse will be forwarded to the Bannock County Sheriff's Office Police Department for appropriate action. (Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. B.1.a.)

Any contractor or volunteer who commits acts of sexual abuse shall be permanently barred from accessing the District VI Juvenile Detention Center. Such incidents will be promptly reported to the appropriate law enforcement authorities for potential criminal prosecution and to relevant professional licensing agencies. The District VI Juvenile Detention Center will take appropriate remedial action as required, which may include prohibiting further contact with juveniles in cases where contractors or volunteers violate agency policies regarding sexual abuse or sexual harassment.

During the past twelve months, the facility reported no cases of contractors or volunteers being referred to law enforcement agencies or licensing bodies for the sexual abuse of residents. The Detention Manager stated that any contractor or volunteer alleged to have breached the agency's sexual abuse or sexual harassment policies would be denied entry to the facility pending the outcome of a formal investigation.

All employees, volunteers, and independent contractors are required to fully understand that the department strictly prohibits any sexual relationship with individuals under departmental supervision. Such conduct constitutes a grave violation of the department's standards and will not be tolerated. Engaging in personal or sexual relationships with individuals under supervision will result in immediate termination of the individual's contractual or volunteer status.

Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. B.1., and interview with Detention Manager, addresses 115.377 (a).

Policy 2-18 Prison Rape Elimination Act Procedures, page 17, VIII. B.1.a., and interview with Detention Manager, addresses 115.377 (b).

The District VI Juvenile Detention Center complies with Standard 115.377:

	Corrective action for contractors and volunteers.
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115.378	Interventions and disciplinary sanctions for residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 7-02 Consequences of Rule Infractions and Special Programs <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health Staff 2. Detention Manager <p>115.378 (a): If an investigation or prosecution determines that there is adequate evidence for an administrative finding of juvenile-on-juvenile sexual abuse, the juvenile will face disciplinary sanctions in accordance with the facility's formal disciplinary procedures. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18 C.1.)</p> <p>115.378 (b): Disciplinary sanctions shall be proportional to the severity and circumstances of the abuse committed, taking into account the resident's prior disciplinary record and the sanctions issued for similar offenses committed by other residents with comparable histories. Should a disciplinary sanction result in the restriction of a resident to their room, the facility will ensure that the resident continues to have access to daily large-muscle exercise as well as any legally mandated educational or special education services. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.1.b.c.and d.)</p> <p>115.378 (c): The disciplinary process shall consider whether a resident's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.1.a.)</p> <p>115.378 (d): Whenever feasible, the District VI Juvenile Detention Center shall assess whether to provide the offending juvenile with opportunities to participate in interventions such as therapy, counseling, or other programs aimed at addressing</p>

and remedying the underlying causes or motivations of the abuse, subject to availability. The Center may mandate participation in such interventions, if they are accessible, as a prerequisite for engagement in any incentive-based behavior management systems, such as the Level System. However, participation in these interventions shall not be required in order to access general programming or educational services. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.2.)

115.378 (e): A juvenile may be subject to disciplinary action for engaging in sexual contact with a staff member only if it is determined that the staff member did not provide consent for such contact. In addition, a determination of non-consensual contact may necessitate referral of the juvenile for prosecution. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.3.)

115.378 (f): A report of sexual abuse that is made in good faith and is based on a reasonable belief that the alleged conduct occurred, shall not be considered a false report or misrepresentation. Such a report shall not serve as grounds for disciplinary action, even if subsequent investigation fails to produce sufficient evidence to substantiate the allegation. (Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.4.)

115.378 (g): The District VI Juvenile Detention Center maintains a zero-tolerance policy regarding all forms of sexual abuse and sexual harassment within the facility. All individuals housed within the Center are under the age of 18 and, as such, are legally incapable of providing consent to any sexual activity. Any sexual activity between juveniles is strictly prohibited and will result in disciplinary action, with such incidents also being referred for prosecution. Furthermore, any sexual activity between staff and juveniles is absolutely forbidden; staff members found to have engaged in such conduct will be subject to disciplinary measures and prosecution, except in cases where it is determined that the staff member did not consent to the activity. (Policy 2-18 Prison Rape Elimination Act Procedures, page 5. A.1.)

Residents are granted all appropriate rights and responsibilities throughout the disciplinary hearing process. Disciplinary action may be imposed on a resident for engaging in sexual contact with a staff member only if it is determined that the staff member did not provide consent for such contact. The District VI Juvenile Detention Center strictly prohibits all sexual activity between residents and enforces disciplinary measures for violations of this policy. In instances where sexual activity between residents is determined to be consensual, the incident is addressed as a disciplinary infraction rather than as a violation of the Prison Rape Elimination Act (PREA) concerning sexual abuse. Furthermore, no disciplinary action shall be taken against a resident who submits a report of sexual abuse in good faith, based on a reasonable belief that the alleged conduct occurred, even if subsequent investigation does not yield sufficient evidence to substantiate the allegation. The Agency prohibits all sexual activity between residents and imposes disciplinary sanctions for such behavior; however, such activity is classified as sexual abuse only when it is determined that coercion was involved.

	<p>There have been no reported sexual abuse or harassment among Detention Center residents in the past 12 months.</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18 C.1., addresses 115.378 (a).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.1.b. c. and d., and the interview with the Detention Manager addresses 115.378 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.1.a., and the interview with the Detention Manager address 115.378 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.2., and the interview with Mental Health staff, address 115.378 (d).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.3., addresses 115.378 (e).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 18. C.4., addresses 115.378 (f).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 5. A.1., addresses 115.378 (g).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.378: Interventions and Disciplinary sanctions for residents.</p>
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115.381	Medical and mental health screenings; history of sexual abuse
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-02 Health Appraisal 3. Policy 6-21 Mental Health 4. 16-1605 Idaho State Code 5. Mental Health 14-day Assessment Note Samples <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health staff 2. Risk of Victimization and Abusiveness

115.381 (a): The District VI Juvenile Detention Center provides a follow-up meeting with a medical and mental health practitioner for residents who disclose any prior sexual victimization during screening within 14 days of the intake screening. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, A. 1. and 2., Policy 6-02 Health Appraisal, page 1, II. A., Policy 6-21 Mental Health, page 1, II. A. 4. c. and d.)

115.381 (b): If a resident reveals past sexual abuse, whether in an institution or community, staff must offer a follow-up with a mental health practitioner within 14 days of intake screening. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. A. 1. and 2., Policy 6-02 Health Appraisal, page 1, II. A., Policy 6-21 Mental Health, page 1, II. A. 4. c. and d.)

115.381 (c): Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff , as required by facility policy and Federal State, or local law, to inform treatment plans, security and management decisions, including housing, school and program assignments. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. A. 3.)

115.381 (d): Residents at the District VI Juvenile Detention Center are under the age of eighteen. Medical and mental health practitioners do not require informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting. (16-1605 Idaho State Code)

Information related to treatment plans and sexual victimization or abuse is restricted to mental health practitioners and other designated personnel as necessary. All applicable regulations concerning the confidentiality of medical information are rigorously enforced. Residents are informed of mandatory reporting requirements and the types of information considered protected.

Medical and mental health staff collaborate to gather and monitor data indicating any history of sexual victimization. If a resident discloses having engaged in predatory behavior, this information is properly documented. Follow-up evaluations by mental health staff occur as needed, with reassessments provided within 14 days of intake. All information related to victimization or predatory conduct is shared strictly on a need-to-know basis. Classification and custodial staff are notified to support appropriate security measures and housing assignments.

During the interview, the mental health staff member confirmed that information regarding sexual victimization or abusiveness is disclosed only to staff members who require it for decision-making purposes. When appropriate, child protective agencies are notified about prior sexual victimization. All relevant information is utilized to inform mental health treatment plans and critical decisions concerning security, housing, educational placement, and program participation.

Policy 2-18 Prison Rape Elimination Act Procedures, page 19, A. 1. and 2., Policy 6-02 Health Appraisal, page 1, II. A., Policy 6-21 Mental Health, page 1, II. A. 4. c. and d., Mental Health 14-day Assessment Note Samples, and the interview with staff who conduct Risk of Victimization and Abusiveness addresses 115.381 (a).

	<p>Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. A. 1. and 2., Policy 6-02 Health Appraisal, page 1, II. A., Policy 6-21 Mental Health, page 1, II. A. 4. c. and d., Mental Health 14-day Assessment Note Samples, and the interview with staff who conduct Risk of Victimization and Abusiveness addresses 115.381 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. A. 3., interviews with Mental Health Staff, addresses 115.381 (c).</p> <p>16-1605 Idaho State Code, interview with Medical RN and Mental Health addresses 115.381 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.381: Medical and mental health screenings; history of sexual abuse.</p>
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115.382	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 6-18 Abuse Reporting 3. 19-5303 Cost of Medical Exams <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health staff 2. Medical Staff <p>115.382 (a): Juvenile victims of sexual abuse are provided with prompt and unobstructed access to emergency medical treatment and crisis intervention services. The specific nature and extent of these services are determined by medical and mental health professionals in accordance with their professional judgment. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 1.)</p> <p>115.382 (b): Upon receiving a report of recent abuse, first responders initiate preliminary measures to ensure the safety of the victim and promptly notify the designated personnel responsible for coordinating medical and mental health services. In the event that qualified medical or mental health practitioners are not present on duty, staff first responders shall implement initial protective actions for the victim and immediately contact the appropriate law enforcement agency as well</p>

as medical and mental health professionals. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 2.)

115.382 (c): Incarcerated juvenile victims of sexual abuse shall be provided with timely information regarding, and prompt access to, emergency contraception and prophylactic treatment for sexually transmitted infections, consistent with professionally accepted standards of care and when medically indicated. Resident victims of sexual abuse during incarceration shall also be offered testing for sexually transmitted infections as deemed medically appropriate. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 3.)

11382 (d): Treatment services shall be rendered to the victim at no financial cost, irrespective of whether the victim identifies the alleged perpetrator or participates in any investigation related to the incident. Provision of such services will not be contingent upon the victim's cooperation with investigative procedures or the disclosure of the abuser's identity. (Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 4. and 19-5303 Cost of Medical Exams)

Medical and Mental Health Staff ensure that residents have access to emergency treatment as required. Upon receiving notification, these professionals assess the situation and determine the appropriate course of action in accordance with their professional judgment. All treatments are administered promptly and adhere to established professional standards of care. Furthermore, services are provided at no financial cost to the victim, irrespective of the victim's willingness to cooperate with authorities. Interviews conducted with Medical Staff confirm compliance with these standards.

According to the procedures established by the District VI Juvenile Detention Center, residents are transported or referred to Portneuf Medical Center to guarantee unobstructed access to emergency medical treatment and crisis intervention services. The sexual assault protocol at Portneuf Medical Center enables victims of sexual assault to receive immediate and compassionate care from medical professionals who are experienced in addressing victimization, thereby facilitating both the medical examination and evidence collection processes.

The Family Services Alliance provides mental health care, with an Advocate present at the hospital to support the resident victim. These services are rendered at no cost to the residents. Additionally, medical staff at the hospital offer information regarding emergency contraception and prophylactic treatment for sexually transmitted infections, with ongoing follow-up provided by medical staff at the District VI Juvenile Detention Center.

Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 1., interviews with Medical RN and Mental Health staff address 115.382 (a).

Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 2., addresses 115.382 (b).

Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 3., interviews

	<p>with Medical RN and Mental Health staff address 115.382 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 19, IX. B. 4., and 19-5303 Cost of Medical Exams addresses 115.382 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.382: Access to emergency medical and mental health services.</p>
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115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures <p>Interviews</p> <ol style="list-style-type: none"> 1. Mental Health staff 2. Medical Staff <p>115.383 (a): The District VI Juvenile Detention Center provides medical and mental health evaluation, and as appropriate, treatment to all juveniles who have been victimized by sexual abuse. Upon release, residents treated by Mental Health staff are provided with information and the opportunity to meet with Community Mental Health staff. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20. IX. C. 1.)</p> <p>115.383 (b): The evaluation and treatment of these victims shall encompass, as appropriate, the provision of follow-up services, the development of individualized treatment plans, and, when necessary, referrals to ensure continuity of care upon transfer to other facilities or upon release from custody. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.a.)</p> <p>115.383 (c): The facility shall provide resident victims of sexual abuse with medical and mental health services consistent with the community level of care. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.b.)</p> <p>115.383 (d): Resident victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.c.)</p>

115.383 (e): If pregnancy results, such victims shall receive timely information about and access to all pregnancy-related medical services that are lawful in the community. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.c. 1.)

115.383 (f): Resident victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.d.)

115.383 (g): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.e.)

115.383 (h): The facility shall conduct a mental health evaluation of all known resident on resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by qualified mental health practitioners. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.f.)

Female residents who are victims of sexually abusive vaginal penetration are offered pregnancy testing. In the past 12 months, there have been no reported cases of vaginal penetration at the District VI Juvenile Detention Center. Victims of sexual abuse are also provided with the opportunity to undergo testing for sexually transmitted infections (STIs). Testing and treatment for STIs are available to all residents, and access to medical treatment for such conditions is not limited to victims of sexual abuse. All services provided by Medical and Mental Health staff are offered at no cost to the victims. Interviews with Medical and Mental Health staff confirm the facility's adherence to this standard.

The District VI Juvenile Detention Center ensures the provision of ongoing medical and mental health care for both victims and perpetrators of sexual abuse. This includes appropriate follow-up services, the development of individualized treatment plans, and the arrangement of continued care upon release from custody. If necessary, pregnancy testing and corresponding follow-up care are available. Medically indicated STI testing is also provided as appropriate. All such care is delivered to residents without financial obligation.

The facility offers mental health evaluations to identified abusers and provides treatment when deemed appropriate by a qualified mental health practitioner. Compliance with this standard is supported by interviews with Medical and Mental Health staff.

Medical staff have indicated their commitment to offering appropriate treatment services to residents who have been victimized by sexual abuse, which includes, but is not limited to, testing and education regarding pregnancy and sexually transmitted infections.

Policy 2-18 Prison Rape Elimination Act Procedures, page 20. IX. C. 1., and interviews with Medical and Mental Health addresses 115.383 (a).

	<p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.a., and interviews with Medical and Mental Health addresses 115.383 (b).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.b., and interviews with Medical and Mental Health addresses 115.383 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.c., and interviews with Medical and Mental Health addresses 115.383 (d).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.c. 1., and interviews with Medical and Mental Health addresses 115.383 (e).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.d., and interviews with Medical and Mental Health addresses 115.383 (f).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.e., and interviews with Medical and Mental Health addresses 115.383 (g).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 20, IX. C. 1.f., and interviews with Medical and Mental Health addresses 115.383 (h).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.383: Ongoing medical and mental health care for sexual abuse victims and abusers.</p>
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115.386	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Sexual Abuse Incident Review Template <p>Interviews</p> <ol style="list-style-type: none"> 1. Incident review team 2. Detention Manager 3. PREA Coordinator <p>115.386 (a) and (b): The PREA Coordinator shall conduct a sexual abuse incident review at the conclusion (ordinarily within 30 days) of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded. (Policy 2-18 Prison Rape</p>

Elimination Act Procedures, page 20, X. A.)

115.586 (c): The review team shall include the Director and Assistant Director, with input from supervisors, investigators, the nurse, and mental health clinician. (Policy 2-18 Prison Rape Elimination Act Procedures, page 20, X. A. 2.)

115.586 (d) The review team shall:

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- Consider whether the incident or allegation was motivated by race, ethnicity, sexual orientation, gender identity, status, or perceived status, gang affiliation, or other group dynamics at the facility.
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of staffing levels in that area during different shifts.
- Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its findings and any recommendations for improvement and submit such report to the Prosecuting Attorney. (Policy 2-18 Prison Rape Elimination Act Procedures, pages 20-21, X. A. 3. a-f)

115.586 (e): The facility shall implement the recommendations for improvement or will document its reasons for not doing so. (Policy 2-18 Prison Rape Elimination Act Procedures, page 21, X. A. 4.)

Staff at the District VI Juvenile Detention Center conduct reviews of final investigative reports within 30 days following the conclusion of each investigation. The review team, consisting of the Detention Manager, PREA Coordinator, and pertinent personnel, examines whether changes to procedures are warranted in light of factors such as class affiliation, sexual orientation, or group dynamics. Additionally, the team evaluates the adequacy of monitoring technology, the presence of physical barriers, and staffing patterns. Upon completion of this process, a comprehensive report containing recommendations is produced.

During the preceding 12 months, the facility reported zero criminal or administrative investigations of alleged sexual abuse that were completed and subsequently followed by a sexual abuse incident review within the specified 30-day period.

Policy 2-18 Prison Rape Elimination Act Procedures, page 20, X. A., and Sexual Abuse Incident Review Template, addresses 115.386 (a).

Policy 2-18 Prison Rape Elimination Act Procedures, page 20, X. A., and Sexual Abuse Incident Review Template, addresses 115.386 (b).

Policy 2-18 Prison Rape Elimination Act Procedures, page 20, X. A. 2., Sexual Abuse

	<p>Incident Review Template, interviews with Incident review team and the Detention Manager addresses 115.386 (c).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, pages 20-21, X. A. 3. a-f, Sexual Abuse Incident Review Template, interviews with Incident review team, PREA Coordinator, and the Detention Manager addresses 115.386 (d).</p> <p>Policy 2-18 Prison Rape Elimination Act Procedures, page 21, X. A. 4., Sexual Abuse Incident Review Template, and interviews with Incident review team, PREA Coordinator, and the Detention Manager addresses 115.386 (e).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.386: Sexual abuse incident reviews.</p>
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115.387	Data collection
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 2-18 Prison Rape Elimination Act Procedures 2. Policy 1-21 PREA Data Collection, Aggregation and Review 3. D6JDC Annual Survey of Sexual Violence Report 2024 4. Mini Cassia Annual Report 5. Mini Cassia JDC 2023 Final PREA Audit Report 6. SSV 2023 <p>115.387 (a): The Center shall collect accurate, uniform data for every allegation of sexual abuse; review data collected and aggregated pursuant to this section in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, and make such data available to the public. The facility shall collect accurate, uniform data for every allegation of sexual abuse using a standardized instrument and set of definitions. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1.)</p> <p>115.387 (b): The facility shall collect the incident-based sexual abuse data annually. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1.)</p>

115.387 (c): The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice's Bureau of Justice Statistics. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1.)

115.387 (d): The facility shall collect data from all available sources. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.2.)

115.387 (e): The District VI Juvenile Detention Center collects incident based and aggregated data from contracted facilities. (Mini Cassia Annual Report, Mini Cassia JDC 2023 Final PREA Report)

115.387 (f): Upon request, the facility shall provide all such data from the previous year to the Department of Justice no later than June 30. (SSV 2023, Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.4.)

The facility submitted the Annual Survey of Sexual Violence Report for the years 2021 through 2024. This report provides a comprehensive account of incidents involving non-consensual youth-on-youth sexual acts, staff sexual misconduct, staff-to-youth sexual harassment, and resident-to-resident sexual harassment for each calendar year. Additionally, the report specifies whether each incident was substantiated, unsubstantiated, or unfounded, and indicates if any cases remained under investigation at the time of reporting.

Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1., 2023 SSV, and D6JDC Annual Survey of Sexual Violence Report 2024, addresses 115.387 (a).

Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1., 2023 SSV, and D6JDC Annual Survey of Sexual Violence Report 2024, addresses 115.387 (b).

Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.1., 2023 SSV, and D6JDC Annual Survey of Sexual Violence Report 2024, address 115.387 (c).

Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.2., 2023 SSV, and D6JDC Annual Survey of Sexual Violence Report 2024, address 115.387 (d).

Mini Cassia Annual Report, and Mini Cassia JDC 2023 Final PREA Report, address 115.387 (e).

Policy 1-21 PREA Data Collection, Aggregation and Review, page 1. II A.4., 2023 SSV, address 115.387 (f).

The District VI Juvenile Detention Center complies with Standard 115.387 Data Collection.

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115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents</p> <ol style="list-style-type: none"> 1. Policy 1-21 PREA Data Collection, Aggregation and Review 2. D6JDC PREA Report 2024 <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>115.388 (a): The facility reviews collected data to assess and improve sexual abuse prevention, detection, and response policies, practices, and training. The review includes a. identifying problem areas; b. taking ongoing corrective action; and c. preparing an annual report of findings and corrective actions taken. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C.1.)</p> <p>115.388 (b): The report is a comparison of the current year's data and corrective actions with those from previous years and offers an evaluation of the facility's progress in addressing sexual abuse. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C.)</p> <p>115.388 (c): The facility's report shall be approved by the Director and made readily available to the public through its Web site. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C.)</p> <p>115.388 (d): The facility is permitted to redact certain content from its reports if disclosing such information would pose a clear and specific risk to the safety and security of the institution; however, the facility is required to specify the nature of the material that has been redacted. (D6JDC PREA Report 2024)</p> <p>The Detention Manager of the District VI Juvenile Detention Center conducts a thorough review of all reported incidents of sexual abuse and harassment to identify areas requiring improvement and to formulate recommendations for corrective action. Policy modifications are enacted to strengthen the facility's adherence to the Prison Rape Elimination Act (PREA). Additionally, the annual report is made publicly accessible through the Center's website at https://www.bannockcounty.gov/wp-content/uploads/2025/02/PREA-Report-2024.pdf.</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C.1., D6JDC</p>

	<p>PREA Report 2024, and interview with the PREA Coordinator addresses 115.388 (a).</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C., D6JDC PREA Report 2024, and interview with the PREA Coordinator addresses 115.388 (b).</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C., D6JDC PREA Report 2024, and interview with the PREA Coordinator, addresses 115.388 (c).</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 2, C., D6JDC PREA Report 2024, and interview with the PREA Coordinator and interview with the PREA Coordinator addresses 115.388 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.388: Data review for corrective action.</p>
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115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <ol style="list-style-type: none"> 1. Policy 1-21 PREA Data Collection, Aggregation and Review <p>Interviews</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>115.389 (a): The facility shall ensure that the data collected is securely retained. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.3)</p> <p>115.389 (b): The facility shall make all collected sexual abuse data, readily available to the public at least annually through its Web site. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.5)</p> <p>115.389 (c): Before making collected sexual abuse data publicly available, the facility shall remove all personal identifiers. (D6JDC PREA Report 2024)</p> <p>115.389 (d): The facility shall maintain sexual abuse data for at least 10 years after the date of its initial collection unless rules Federal, State, or local law require otherwise. (Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.3)</p> <p>The Detention Manager at the District VI Juvenile Detention Center exercises strict oversight over all data. The Detention Manager is vested with the authority to access files and data. Any data released to the public is carefully reviewed to ensure</p>

	<p>that it does not include personal identifiers. Furthermore, the District VI Juvenile Detention Center retains all such data for a period of ten years from the date of initial collection.</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.3., and the interview with the PREA Coordinator addresses 115.389 (a).</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.5., and the interview with the PREA Coordinator addresses 115.389 (b).</p> <p>D6JDC PREA Report 2024., and the interview with the PREA Coordinator address 115.389 (c).</p> <p>Policy 1-21 PREA Data Collection, Aggregation and Review, page 1 II. A.3., and the interview with the PREA Coordinator addresses 115.389 (d).</p> <p>The District VI Juvenile Detention Center complies with Standard 115.89: Data storage, publication, and destruction.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>The District VI Juvenile Detention Center has fulfilled its obligations by conducting the mandated Prison Rape Elimination Act (PREA) audits in accordance with the established audit cycles. The assigned auditor conducted a review of the Bannock County website, located at https:// https://www.bannockcounty.us/juvenile-detention/, and verified the presence of the most recently completed PREA audit report. The most recent PREA audit for the District VI Juvenile Detention Center was finalized on November 3, 2022, corresponding with the first year of Audit Cycle 4. The preceding audit was concluded on December 21, 2019, aligning with the initial year of Audit Cycle 3. The current PREA audit for the District VI Juvenile Detention Center was administered during the first year of Audit Cycle 5.</p> <p>During the audit process, the auditor was granted unrestricted access to the facility, enabling the execution of comprehensive interviews and the review of documentation consistent with the applicable standards. The auditor was authorized to request and obtain copies of any pertinent documents, including those maintained in electronic formats. The auditor was permitted to conduct confidential interviews with both residents and staff members. Residents were afforded the opportunity to submit confidential information or correspondence to the auditor utilizing the same protocols as those employed for communication with legal counsel. It is noted, however, that the auditor did not receive any confidential information or correspondence from residents housed at the District VI Juvenile Detention Center. Additionally, no correspondence was received from agency or</p>

	facility personnel, volunteers, or interns.
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.403 (f) – Pursuant to the analysis of Standard 115.401(a), it is confirmed that the facility’s Final PREA Audit Report was posted on the facility’s official website. A comprehensive review of the agency’s website demonstrates that the agency has ensured public accessibility to Prison Rape Elimination Act (PREA) audit reports, in accordance with the requirements of the applicable standard. The Auditor conducted an examination of the Bannock County web page and verified that the PREA Final Report corresponding to the previous audit cycle year was available online and had been published.</p>

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

	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	yes
115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate	yes

	staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes

	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational	yes

	functions of the facility? (N/A for non-secure facilities)	
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes
115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility	yes

	determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	
115.315 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including:	yes

	Residents who have speech disabilities?	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's	yes

	safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes
115.317	Hiring and promotion decisions	

(c)		
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes
115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current	yes

	employees?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.321 (a)	Evidence protocol and forensic medical examinations	

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

	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	no
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is responsible for investigating allegations of sexual abuse.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	na
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes

	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes
115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate	yes

	comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	

	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na

115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (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 juvenile victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (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

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (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
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (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
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does	yes

	the agency attempt to ascertain information about: Age?	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes
115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked	yes

	pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes
115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when	yes

	making facility and housing placement decisions and programming assignments?	
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	na
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	na
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private	yes

	entity or office that is not part of the agency?	
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	no
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.352 (b)	Exhaustion of administrative remedies	

	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.352 (e)	Exhaustion of administrative remedies	

	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes
115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes

	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and	yes

	the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of	yes

	the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes
115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in	yes

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

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

	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 resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes

115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371	Criminal and administrative agency investigations	

(f)		
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency	yes

	does not provide a basis for terminating an investigation?	
115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.373 (c)	Reporting to residents	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency	yes

	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?	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

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

115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes
115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes

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

	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or	yes

	cooperates with any investigation arising out of the incident?	
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes

	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for	yes

	the confinement of its residents.)	
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when	yes

	publication would present a clear and specific threat to the safety and security of a facility?	
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na

	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. 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.)	yes